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**One Hundred And Twenty-Fifth  
ANNUAL REPORT**

of the

**South Carolina State  
Hospital**

**FOR THE YEAR ENDING JUNE 30, 1948**



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Printed Under the Direction of the  
Joint Committee on Printing  
General Assembly of South Carolina

**One Hundred And Twenty-Fifth  
ANNUAL REPORT**

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**South Carolina State  
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C. J. Williams



## CHARLES FREDERICK WILLIAMS, M.D.

1875-1948

Superintendent, South Carolina State Hospital May 1, 1915 to May 1, 1945

Director of Research, South Carolina State Hospital

May 1, 1945 to June 3, 1948

Charles Frederick Williams, M.D., acclaimed one of South Carolina's "history makers," was born August 6, 1875, in York County, South Carolina; the son of Leroy Russell Williams and Virginia Wallace Williams.

He attended private schools and Bank's High School; and in 1899 his medical degree was conferred upon him by the University of Maryland School of Medicine.

He first practiced in York, then on March 4, 1901, he became assistant surgeon, United States Army, and was assigned to Fort Scriven, Georgia. In 1902 and 1903 he served in the Philippines.

On March 4, 1903, Dr. Williams resigned from the Army and took post-graduate work in Baltimore, and in July 1903, began general practice in Columbia.

On December 8, 1903, he married Miss May Wilson of Manning who passed away on June 3, 1932. There are three daughters, Mrs. Preston C. Manning (Virginia Wallace); Mrs. Wm. C. Coker (Louise Barron), and Miss Adeline Hughes Williams; and five grand-sons and two grand-daughters.

Dr. Williams served as Columbia's city physician in 1904. He became secretary of the State Board of Health in 1907 and in 1908 became South Carolina's first State Health Officer.

In 1910 he was elected vice-chairman, American Medical Association section on preventive medicine.

In 1911 he resigned as State Health Officer and went to Europe for post-graduate work, resuming internal medicine in Columbia upon his return the same year.

In 1911 he organized and conducted the first tuberculosis clinic in Columbia.

The Columbia Medical Society elected him as president in 1912.

On March 4, 1915, Dr. Williams was appointed by Governor Richard I. Manning as a member of the Board of Regents of the South Carolina State Hospital; and 8 days later was elected vice-chairman and secretary of the Board of Regents.

May 1, 1915, was an all-important date in Dr. Williams' life and in the history of the State for then he assumed the duties as superintendent of the South Carolina State Hospital. The appointment to this position by Governor Manning proved to be a wise one and in filling it Dr. Williams won for himself great distinction as a hospital administrator and a true friend of the mentally ill. Upon entering the field of psychiatry he had no special psychiatric training, but his previous varied experiences and unusual sympathetic understanding placed him in a position to realize the needs of the State in caring for the mentally ill and prepared him to meet the problems of the executive.



The hospital administration under Dr. Williams was characterized by a steady improvement in the hospital plant, the medical care of the patients and the complete revision and modernization of all the laws with reference to the mentally sick.

Remodeling, restoration, reorganization and a building program under the guiding hand of Dr. Williams resulted in modern laws, modern buildings and modern methods of treatment. The unit at State Park for Negro patients was developed into a well-equipped, modern department.

The School of Nursing was further recognized for the excellent training given; and a School of Nursing for Negro Women established at the State Park unit of the hospital.

1923—Appointed Professor of Psychiatry, Medical College, State of South Carolina, Charleston, S. C.

Realizing the importance of preventive medicine, Dr. Williams in January, 1923, began the establishment of mental hygiene clinics in centrally located cities throughout the State. He was one of the organizers and a director of the S. C. Society for Mental Hygiene; a director, Richland County Mental Hygiene Society; and president, S. C. Conference on Social Work. Also a director, the National Committee for Mental Hygiene.

Many positions of importance and distinction in the field of medicine were bestowed upon him; president of the Columbia Medical Society; the S. C. Medical Association; the S. C. Hospital Association, and, in 1934, of the American Psychiatric Association.

His activities in civic and religious fields have merited recognition and honors. Dr. Williams was one of the organizers, a member of the executive committee and a director, Columbia Chapter, American Red Cross; president, Columbia Community Chest; president, Columbia Rotary Club, and a delegate to the International Convention of Rotarians at Vienna, Austria, in 1931. For years he was an elder in the First Presbyterian Church, and active on various committees in church affairs.

In July 1934 he was presented in Charleston, S. C., with the South Carolina American Legion plaque for distinguished service.

In 1939 the University of South Carolina awarded him the Algernon Sydney Sullivan medal for unselfish service. In June 1940, the degree of Doctor of Laws was conferred upon Dr. Williams by the University.

The new reception building for white patients at the South Carolina State Hospital was completed and accepted by the Board of Regents in 1937. Soon thereafter a signal honor was paid Dr. Williams by every employee of the hospital signing a petition presented to the Board requesting that the building be named for him.

In July 1942, Dr. Williams became a trustee, along with Hon. Christie Benet and Mr. Gustaf Sylvan, of the Ensor Research Foundation established by the terms of the will of the late Mrs. W. S. (Grace Ensor) Brown, daughter of Dr. J. F. Ensor, superintendent of the hospital 1870-1877.



On May 1, 1945, Dr. Williams at his own request, retired as superintendent after thirty years efficient, outstanding service, during which the South Carolina State Hospital developed into one of the finest in the South for the care and treatment of the mentally ill.

A touching tribute was paid him on April 29, 1945, by the patients of the white departments who were responsible for the entire program of music, talks and presentation of gifts in the auditorium, which was filled with patients, the Williams family and invited guests.

On May 1, 1945, the personnel of the hospital honored Dr. Williams with a reception in the Mills Building and a barbecue supper on the lawn to which the medical society and many personal friends were invited. He was commended in a program presented later in the auditorium by various friends and colleagues; and given a resolution from the hospital personnel along with the announcement that his portrait would be painted by the artist Charles Mason Crowson as a gift from the employees.

On that date Dr. Williams assumed the position of director of research with his energies devoted to the enlargement of the research endowment through gifts, bequests, etc., so there may be comparable achievement in mental research as in the realm of physical medicine.

Dr. Williams passed away suddenly and unexpectedly at his country home, "Cherry Hill" near Columbia on June 3, 1948.



## In Memoriam

CHARLES FREDERICK WILLIAMS, M.D.

1875-1948

WHEREAS, in the passing of Dr. Charles Frederick Williams the South Carolina State Hospital, the State of South Carolina and its citizens, and the United States and its citizens have lost one who devoted his life to the service of his fellow man, to the improvement of medical conditions in South Carolina and throughout the nation, and who was a pioneer in the field of mental illness; and

WHEREAS, the South Carolina State Hospital stands as a living and continuing monument to the memory of the accomplishments of Dr. Williams, and to the progress in the field of psychiatry which resulted from his capable and energetic direction over a period of more than thirty years; and

WHEREAS, Dr. Williams was superintendent of the South Carolina State Hospital for a period of thirty years, from May 1915 until May 1945, during which time his wise guidance served as an inspiration to all of those who worked with him; and the institution of which he was the head, its staff of doctors and its workers became recognized as leaders in the field of psychiatry and treatment of mental disorders, with the result that the South Carolina State Hospital and those who worked for it became nationally recognized as pioneers in the discovery of better and more efficient means of treatment and care of those who were so unfortunate as to be mentally ill; and

WHEREAS, Dr. Williams' progressive spirit and the research it inspired have resulted in the cure and restoration to normal life of many former patients of the South Carolina State Hospital, and the practices and methods adopted under his wise guidance have been widely and generally copied by other institutions of the United States, recognizing the superior and advanced methods in use in the South Carolina State Hospital; and

WHEREAS, Dr. Williams' kind and humanitarian spirit, his genial personality, his honesty and integrity of character, his exemplification of every fine quality of a Southern gentleman, and his Christian attitude toward life endeared him to friends, associates, patients, co-workers, and all with whom he came in contact in any walk of life, to whom his passing was and is a very real and genuine sorrow; and



WHEREAS, the love and esteem which his co-workers of the personnel of the South Carolina State Hospital felt for Dr. Williams have been attested by their having presented a portrait in oils of him painted by the artist Charles Mason Crowson, which portrait the family of Dr. Williams has delivered to the South Carolina State Hospital to be hung in the superintendent's office with portraits of other former illustrious superintendents of this hospital; now, therefore,

BE IT RESOLVED, that the Board of Regents of the South Carolina State Hospital do hereby express to the family of Dr. Charles Frederick Williams and to the personnel of the South Carolina State Hospital their sincere appreciation for this most fitting and appropriate memorial to one whose life was dedicated to the service and betterment of his fellow men.

FURTHER RESOLVED, that a copy of these RESOLUTIONS be sent to the family of Dr. Williams and to the personnel of the South Carolina State Hospital.

FURTHER RESOLVED, that an appropriate tablet in bronze be placed in the superintendent's office of the South Carolina State Hospital beneath the portrait of Dr. Charles Frederick Williams.

J. CALVIN RIVERS

R. L. PLAXICO

OLIN B. CHAMBERLAIN

MRS. WILLIAM R. WALLACE

G. A. BUCHANAN, JR.

Board of Regents, South Carolina  
State Hospital



## OFFICERS OF THE HOSPITAL

### BOARD OF REGENTS

J. CALVIN RIVERS, Chairman.....	Chesterfield
GEORGE A. BUCHANAN, JR.....	Columbia
OLIN B. CHAMBERLAIN, M.D.....	Charleston
R. L. PLAXICO.....	Clinton
MRS. Wm. R. WALLACE.....	Chester

### MEDICAL STAFF

†COYT HAM, M.D.  
Superintendent

GLENN B. CARRIGAN, M.D.  
Clinical Director

\*†C. F. WILLIAMS, M.D.  
Director of Research

H. A. McELROY, M.D.  
†SOL. B. McLENDON, M.D.  
Senior Assistant Physicians, State Park

NEWTON F. GARLAND, M.D.  
Assistant Physician, State Park

†W. P. BECKMAN, M.D.  
†JOE E. FREED, M.D.  
†Wm. S. HALL, M.D.  
E. W. LONG, M.D.  
GORDON R. WESTROPE, M.D.  
Senior Assistant Physicians

H. P. BURBAGE, M.D.  
\*\*LIONELLE D. WELLS, JR., M.D.  
Assistant Physicians

JAMES C. BRABHAM, M.D.  
Pathologist

\*\*\*†GEORGE C. BENET, M.D.  
Surgeon

\*\*\*†GEORGE R. LAUB, M.D.  
Eye, Ear, Nose and Throat

\*\*\*CHAS. J. LEMMON, JR., M.D.  
Neurosurgeon

\*\*\*†AUSTIN T. MOORE, M.D.  
Orthopedic Surgeon



\*\*\*†THOS. A. PITTS, M.D.  
Rontgenologist

\*\*\*J. W. VARNER, M.D.  
Urologist

ROBERT B. BURROWS, Ph. D.  
Parasitologist

ROLAND S. PIKE, D.D.S.  
Dentist

\*\*\*\*E. R. HARRIS  
Pharmacist

H. C. ALLISON  
Technician Laboratory-X-ray

MISS ETHEL SHARPE  
Social Service Worker

MISS BEULAH L. GARDNER, R. N.  
Director of Nursing

†REV. J. OBERT KEMPSON  
Chaplain

LAUREN W. SHELLEY  
Business Manager

T. F. STEVENSON, SR.  
Treasurer

J. W. WHITEHOUSE  
Personnel Officer

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†Certified

\*Died June 3, 1948

\*\*Resigned and left June 16, 1948

\*\*\*Part time

\*\*\*\*Died March 2, 1948

## CONSULTANTS

---

### CARDIOLOGY

†JAMES T. QUATTLEBAUM, M.D.

### DERMATOLOGY

†J. R. ALLISON, M.D.

L. S. BRYAN, M.D.

### DISEASES OF CHEST

JAS. W. FOUCHE, M.D.

†J. GORDON SEASTRUNK, M.D.

### EYE, EAR, NOSE AND THROAT

†DAVID S. ASBILL, M.D.

†W. J. BRISTOW, M.D.

CHAPMAN J. MILLING, M.D.

†J. B. WORKMAN, M.D.

### GYNECOLOGY

†ROBERT E. SEIBELS, M.D.

### INTERNAL MEDICINE

†J. HEYWARD GIBBES, M.D.

†L. EMMETT MADDEN, M.D.

†O. B. MAYER, M.D.

†BEN N. MILLER, M.D.

F. EUGENE ZEMP, M.D.

### ORTHOPEDIC SURGERY

†W. A. BOYD, M.D.

WESTON COOK, M.D.

†JAMES T. GREEN, M.D.

### PATHOLOGY

†K. M. LYNCH, M.D.

†H. H. PLOWDEN, M.D.

### PEDIATRICS

†E. W. BARRON, M.D.

†THOS. D. DOTTERER, M.D.

R. B. JOSEY, M.D.

†Wm. WESTON, JR., M.D.



# RONTGENOLOGY

†MALCOLM MOSTELLER, M.D.

# SURGERY

L. J. BRANNON, M.D.

†GEORGE H. BUNCH, M.D.

†A. F. BURNSIDE, M.D.

†W. M. CORBETT, M.D.

†LeGRAND GUERRY, M.D.

†ROGER G. DOUGHTY, M.D.

†GEORGE T. McCUTCHEN, M.D.

# UROLOGY

†Wm. R. BARRON, M.D.

W. T. BARRON, M.D.

†JAMES E. BOONE, M.D.

J. McMAHAN DAVIS, M.D.

†HUGH E. WYMAN, M.D.

M. H. WYMAN, M.D.

---

†Certified

## THE SOUTH CAROLINA STATE HOSPITAL

Where the best in science will continue to be utilized and to grow for the benefit of the mentally ill; and where scientific medicine will always be practiced and taught.

Where the patient is regarded as an individual and treated for mental illness as well as for any existing physical disease.

Where the mentally ill may continue to learn to make adjustments to the social order and again become self sustaining, an economic asset and not a liability.

Where continued care will always be carried forward on the basis of re-education and reconstruction.

Where any physician of the State may secure assistance in handling any of the neuropsychiatric problems which come to his attention.

Where any physician may come for or contribute to knowledge in the field of neuropsychiatry.

Where students of medicine from our own State medical school may come for clinical training and accept the challenge of psychiatry and specialize in this branch of medicine.

Where the profession of psychiatric nursing will continue, and provision made for psychiatric nurse affiliate training for all standard schools of nursing within the State, adequate to meet standards of the National League of Nursing Education and the Committee of Psychiatric Nursing, American Psychiatric Association.

Where research is provided in the field of mental medicine with hope that some of these as yet unsolved mysteries of the mental processes may be fathomed, thus bringing about new techniques and means of restoration.

Where facilities are afforded for the education of the general public and special groups, ministers, students of psychology, etc., along lines of mental illness and prevention.

Where preventive work is carried on in fact as well as in theory with milder or border line mental illnesses through the mental hygiene department; thus readjusting the individual before hospitalization becomes necessary.

Where psychiatric work with children is provided through the medium of an adequate mental hygiene service for the entire State.



## REPORT OF THE REGENTS

Columbia, S. C., July 1, 1948

*To His Excellency, J. Strom Thurmond, Governor of South Carolina:*

Complying with the Statutes, the Board of Regents of the South Carolina State Hospital respectfully submits to you for transmission to the General Assembly the one hundred and twenty-fifth annual report for the fiscal year 1947-1948.

With this report will be found that of the superintendent giving in detail the activities of all departments.

### PROBLEMS OF ADMINISTRATION

The situation with regard to an adequate medical staff continued to be acute. The number of physicians is far below the minimum prescribed by the American Psychiatric Association, and even greater endeavors of the resident staff, the part-time physicians in the various specialties and the consultants have been insufficient to assure good medical care and attention for the patients.

There has been also no increase in the personnel of the nursing and attendant corps.

And the medical department is the heart of the hospital; it's the heart of any hospital. Buildings do not cure patients although pleasant surroundings in well-constructed and designed buildings may contribute to their cure. Patients can only be cured by trained people. The great need of the hospital, if it is to be a hospital in fact, is, therefore, for the money to employ more trained physicians, more trained nurses, more trained attendants.

### COST OF OPERATION

A more detailed account will be found elsewhere. The financial report is briefly summarized as follows:

Appropriation .....	\$ 2,257,000.00
Deficiency Appropriation .....	173,171.71
	<hr/>
Total .....	\$ 2,430,171.71
Disbursements .....	\$ 2,430,171.71
Income transmitted to State Treasurer .....	76,811.68
Daily Average Population .....	4980
Daily Per Capita Cost .....	\$1.333

## CHANGES IN PERSONNEL—BOARD OF REGENTS

The following appointments to the Board of Regents were made during the year by His Excellency, J. Strom Thurmond, Governor:

Mr. R. L. Plaxico, Clinton, appointed July 1, 1947 to serve until March 21, 1951, to succeed Mr. E. P. Vandiver who died June 3, 1947.

Dr. Olin B. Chamberlain, Charleston, appointed July 25, 1947 to serve until March 21, 1952, filling the vacancy caused by the resignation of Mr. T. Wilbur Thornhill, May 5, 1947.

Mr. George A. Buchanan, Jr., Columbia, appointed January 12, 1948 to serve until March 21, 1948, completing the unexpired term of Hon. Christie Benet who resigned January 9, 1948. Mr. Buchanan was re-appointed, effective March 21, 1948 for a full five years term.

Hon. Christie Benet was appointed to the Board of Regents April 14, 1918 by Governor Richard I. Manning, and was continuously on the Board, with two short exceptions, while United States Senator and for another brief period, until his resignation January 9, 1948. For more than eighteen years he was chairman of the Board. Keenly interested in all things pertaining to the welfare of the mentally ill of South Carolina and the economic operation of the hospital his services were invaluable.

The Board of Regents prepared appropriate Resolutions and directed that copy be incorporated in the permanent records of the Board's transactions with an engrossed copy presented to Mr. Benet.

## MEETING DEMANDS

The patient population of the hospital has continued to grow, and likewise problems of business administration have proportionately increased.

Upon recommendation the Board approved the complete reorganization of business methods and the creation of several new positions which are necessary to insure hospital economy.

During the year all business methods and bookkeeping systems were thoroughly modernized in accordance with recommendations made by the State Auditor.



The installation of modern mechanical bookkeeping and pay roll systems have facilitated the handling of business transactions.

The business manager, one of the positions created, is considered most essential as he will be able to maintain records, check prices against quality, and coordinate all operations in connection with farming, dairying, swine raising and beef production.

The increased demands for reports on employees and former employees by State agencies, the Federal government and individuals necessitated keeping personnel records up to date; and with the rapidly changing personnel, particularly in the nursing and attendant corps, the position of personnel officer is essential.

### TREASURER

On July 1, 1947 Mr. T. F. Stevenson, Sr., succeeded as treasurer, Mr. H. T. Patterson, retired. Having been connected with the treasurer's office since April 22, 1922, with thorough training and years' experience he is well fitted for his new duties.

### BUSINESS MANAGER

In line with the reorganization of the business administration and as the result of the growth and increased operations, the Board of Regents directed creating the position of business manager. The superintendent was fortunate in securing Mr. Lauren W. Shelley of Columbia, S. C. A native of Marion county, graduate of Clemson College in agronomy with post graduate work in soil fertility at the Iowa State College, he has been regional manager, Federal Land Bank, deputy administrator, war finance administrator for South Carolina, and chief appraiser, Loan and Guaranty Section, Veterans' Administration. Because of his training and experience Mr. Shelley is well qualified to handle the responsibilities assumed on June 1, 1948. This position will prove to be an economic measure and will also promote smooth operations in a rapidly growing institution.

### PERSONNEL OFFICER

Realizing the importance of keeping adequate records of rapidly changing personnel, particularly in the nursing and attend-



ant corps, the Board of Regents directed creating the position of personnel officer. We were fortunate in having in the treasurer's department as chief clerk, Mr. John W. Whitehouse.

He is a veteran of World War II, attaining the rank of captain, and when separated was personnel officer at Wakeman General and Convalescent Hospital, Camp Atterbury, Indiana, one of the largest in the country. His training and experience well qualified him for the position assumed on June 1, 1948.

## FARM OPERATIONS

Farming methods have improved as the result of changing from manual to mechanical operations. The transition is not complete, but will be accomplished within the next year. This change has not altered in any way the employment of patients as a therapeutic measure since they are still able to do the same type of work which was formerly assigned to them.

Production was minimized during the summer months as the result of the dry season for the type of soil cultivated. As a result there was a decrease in the amount which could be used as food for the patients as well as for feed for the dairy herds. We were able to purchase corn in the field, which was harvested with patient labor and converted into ensilage, at a much lower figure than the market price for dairy feed, thus effecting considerable saving to the hospital.

Swine farming proves to be a most profitable operation since a large part of the food is swill collected from the dining halls.

The Columbia dairy maintained for white patients and the Moore farm dairy maintained for the Negro patients have continued to operate in a most satisfactory way. From these sources fresh milk is derived which is an essential item of diet for the mentally ill. At the peak of the seasons .92 of a quart per patient was produced. We are striving to produce one quart per patient per day.

## SUPPLIES

Little difficulty was encountered in securing a sufficient quantity of needed supplies and commodities.

Extreme caution was employed in every way due to the increased costs. The practice of making all purchases on competi-



tive bids was rigidly enforced. In an effort to conserve and to live within the appropriation all menus were reduced to a safe, low level.

### SURPLUS COMMODITIES

During the year the hospital received from the Production and Marketing Administration much food which enabled the patients to be given a well balanced diet even at the low daily per capita cost.

The following is the list of items and the amount of each supplied the hospital:

3941—100 pound bags Irish potatoes .....	394,100 pounds
1760 bushels sweet potatoes .....	1,760 bushels
905 boxes green apples .....	905 boxes
570 crates green string beans .....	570 crates
2800 cases 6/10 grapefruit juice .....	16,800 gallons
500—50 pound bags cabbage .....	25,000 pounds
220 cases raisins, 30 pounds to case .....	6,600 pounds
273 boxes dried apples, 50 pounds to box .....	13,650 pounds
320 boxes prunes, 25 pounds to box .....	7,000 pounds
80 cases dehydrated eggs, 56 pounds to case....	4,480 pounds
120 cases honey, 30 pounds to case .....	3,600 pounds

### CONSTRUCTION AND BUILDING FUNDS

The One Million Dollars has been allocated to the hospital from the State's surplus, \$786,570.96 of which has either been spent or allocated to the most urgently needed construction and renovation problems. Federal grant-in-aid funds have been procured for every project undertaken for which this money was available. These funds can be used only for new construction and not for renovation. The latter problem is one of immense proportions, even greater than anticipated before actual operations were started. Federal funds in the amount of \$369,008.65 have been awarded to the hospital. Due to the emergency of our problems the Hospital Division, South Carolina State Board of Health, placed the South Carolina State Hospital on the priority number one list. The Board is deeply appreciative of this consideration.

## NEEDED PERMANENT IMPROVEMENTS

There are problems confronting the hospital which give the Board and the administration much concern. The hospital has fallen heir to these because of the lack of foresight and planning on the part of the good people of the State.

To relieve the existing situation and the overcrowded condition there is urgent need for the following structures:

Medical and surgical buildings for white patients—capacity 250.

Maximum detention building for Negro men, State Park.

Administration Building, State Park.

Ward building for white men—capacity 250.

Ward building for white women—capacity 250.

Cottages (8) for married physicians.

Addition to nurses' home to take care of affiliate nurses.

Living quarters for white attendants.

Building for mental hygiene department.

Building for centralizing mechanical department.

Columbia dairy.

## RECOMMENDATIONS

It is earnestly hoped that the General Assembly will immediately take the necessary steps to make provisions for the care of the alcoholic, the aged, and the mentally deficient Negro. Of necessity, having to deal with these problems has become an enormous one for the hospital.

## REQUESTS

The detailed survey of renovations to the present hospital plant and the necessity for additional new structures were presented to the Budget Commission as a supplement to the maintenance budget request. The survey revealed that the amount of money necessary for this purpose is \$6,000,000.00, and it is earnestly requested that this amount be made available by this session of the General Assembly to be spent over a period of five years.



## MENTAL HEALTH PROGRAM

The superintendent's report will show the progress made in the re-establishment of the mental hygiene clinics under the National Mental Health Act.

The demands made upon the two clinics established in Charleston and in Spartanburg illustrate the importance of the program and the value to the State. The clinics likewise have proved to be an economic measure as the reports show that a large number of patients were treated at home and restored to society who normally would have been committed to the hospital.

## APPRECIATION

Sincere gratitude is expressed to Your Excellency, to the Budget Commission, the State Auditor and to the General Assembly for assistance, cooperation and sympathetic understanding with the many difficulties during the past year.

There is also deep appreciation to all State, county and municipal officers for the continued splendid cooperation.

The loyalty of the entire personnel of the hospital is commendable, and to each one grateful thanks are extended.

Gratitude is expressed to the Production and Marketing Administration for the generous food supplies for patients; and also to the business concerns and individuals who were of valuable help and responsive to the needs of the hospital.

Respectfully submitted

J. CALVIN RIVERS, Chairman  
 GEORGE A. BUCHANAN, JR.  
 OLIN B. CHAMBERLAIN, M.D.  
 R. L. PLAXICO  
 MRS. WM. R. WALLACE

Board of Regents  
 South Carolina State Hospital.

## REPORT OF THE SUPERINTENDENT

Columbia, S. C., July 1, 1948

To the Board of Regents of the South Carolina State Hospital  
Columbia, S. C.

Gentlemen:

Complying with your requirements the annual report for the fiscal year ending June 30, 1948 is herewith respectfully submitted:

### GENERAL STATISTICS July 1, 1947 through June 30, 1948

	White Men	White Women	Negro Men	Negro Women	Total
Patients on books of hospital at beginning of hospital year	1,515	1,794	1,310	1,232	5,851
Admissions during twelve months:					
First admissions .....	543	421	312	220	1,496
Re-admissions .....	135	140	34	55	364
Total received during twelve months .....	678	561	346	275	1,860
Total on books during twelve months .....	2,193	2,355	1,656	1,507	7,711
Discharged from books during twelve months .....	440	391	136	135	1,102
As recovered .....	2	2	....	7	11
As improved .....	241	328	114	105	788
As unimproved .....	21	25	5	12	63
As without psychoses .....	176	36	17	11	240
Died during twelve months .....	120	99	195	102	516
Total discharged and died during twelve months .....	560	490	331	237	1,618
Patients remaining on books of hospital at end of hospital year:					
In hospital .....	1,269	1,457	1,190	1,134	5,050
On parole or otherwise absent .....	364	408	135	136	1,043
TOTAL .....	1,633	1,865	1,325	1,270	6,093

### ADMISSIONS

First admissions during the year numbered 1,496 and re-admissions 364, a total of 1,860.

Of these 678 were white men; 561 white women; 346 Negro men and 275 Negro women.

This was an increase of 228 in the total admissions over the previous year.

Admission was denied 176 persons for whom application was made. The majority of these were the aged who were primarily nursing problems and could be cared for elsewhere. Some of the senile cases would have been accepted had there been sufficient room and adequate nursing and attendant personnel. The problem of the alcoholic was emphasized by the marked increase in the efforts to have them admitted.



### VOLUNTARY ADMISSIONS

Voluntary admittance proves most satisfactory in selected cases of mental illness which meet requirements. One hundred and eleven patients entered the hospital voluntarily, which increase demonstrates the combined efforts in educating the public to recognize that the chances for recovery are greater when the problem is early recognized and proper therapy instituted.

### COURT CASES

During the year 60 persons were committed to the hospital by the Courts of General Sessions and by the Juvenile Domestic Relations Courts in order that their true mental condition might be determined.

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Cerebral arterio sclerosis .....	1	..	1	..	2
Convulsive disorder .....	2	..	1	..	3
Dementia praecox (schizophrenia) .....	7	..	2	..	9
Manic depressive .....	1	..	1	..	2
Mental deficiency .....	..	..	..	1	1
Paranoia and paranoid condition .....	1	1	..	..	2
Psychopathic personality .....	2	..	..	..	2
Syphilitic meningo encephalitis .....	..	..	1	..	1
Trauma .....	1	..	..	..	1
Total with psychoses .....	15	1	6	1	23
Without psychoses:					
Alcoholism .....	2	..	..	..	2
Convulsive disorder .....	1	..	..	..	1
Mental deficiency .....	4	..	3	..	7
Psychopathic personality .....	8	..	..	..	8
Without mental disorder .....	13	..	5	1	19
Total without psychoses .....	28	..	8	1	37
GRAND TOTAL .....	43	1	14	2	60

### COMMITTED BY ORDER OF GOVERNOR

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Cerebral arterio sclerosis .....	..	..	2	..	2
Convulsive disorder .....	1	..	..	..	1
Dementia praecox (schizophrenia) .....	4	..	1	..	5
Epidemic encephalitis .....	..	..	1	..	1
Manic depressive .....	1	..	..	..	1
Mental deficiency .....	1	1	1	..	3
Syphilitic meningo encephalitis .....	..	..	1	..	1
Total with psychoses .....	7	1	6	..	14
Without psychoses:					
Mental deficiency .....	2	..	1	..	3
Primary behavior disorder .....	1	..	..	..	1
Psychopathic personality .....	2	..	..	..	2
Without mental disorder .....	..	..	2	1	3
Total without psychoses .....	5	..	3	1	9
GRAND TOTAL .....	12	1	9	1	23

## SPECIAL EXAMINATIONS AT THE SOUTH CAROLINA STATE PENITENTIARY

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Dementia praecox (schizophrenia) .....	1	..	..	..	1
Total with psychoses .....	1	..	..	..	1
Without psychoses:					
Mental deficiency .....	1	..	..	..	1
Psychopathic personality .....	1	..	..	..	1
Without mental disorder .....	9	..	1	1	11
Total without psychoses .....	11	..	1	1	13
GRAND TOTAL .....	12	..	1	1	14

### DEATHS

There were 516 deaths; 120 white men or 5.5%; 99 white women or 4.2%; 195 Negro men or 12%; and 102 Negro women or 6.8%.

The death rate based upon the entire number treated was the same as for the previous year, 6.7%.

Only 3 deaths occurred from self destruction, and this is considered to be minimal for the large number of patients admitted with suicidal potentialities.

### DISCHARGES

Discharged from the books were 1,102 patients. Of these 11 were considered as recovered; 788 as improved; and 63 as unimproved.

Of the 240 without psychoses, 122 were alcoholics; 10 drug addicts; 19 mental defectives; and 89 in other groups without mental disorder.

Included in the last group are those transferred from various State institutions for mental observation, and the Court cases found to be without mental disorder.

### DEATHS AMONG PERSONNEL

With profound regret the deaths of the following members of the hospital personnel are reported:

Eddie Wright, kitchen helper at State Park since September 1, 1941, passed away August 24, 1947.



Miss Bessie Hartin, an attendant in the white women's department, employed September 30, 1925, was struck and accidentally killed by a backing truck early on the morning of December 18, 1947. Due to darkness and a heavy fog the regrettable incident was entirely accidental.

E. D. DuBard, kitchen helper at the unit in the city, died on January 7, 1948. He entered the service February 25, 1924.

Mr. Ben Teal, a night watchman in the city since February 20, 1947, passed away April 2, 1948.

Mr. Edgar R. Harris, who came to the hospital June 29, 1915, later assuming the position of druggist, passed away March 2, 1948.

With sorrow the sudden and unexpected death on June 3, 1948 of Dr. Charles Frederick Williams is reported. He was superintendent of the hospital for thirty years, and since his retirement from that position on May 1, 1945 had continued to serve the hospital as director of research.

### RETIREMENT

Complying with the provisions of the South Carolina Retirement Act passed by the 1945 General Assembly and amended by the 1946 General Assembly, the following were retired:

	Date of Employment	Retired
Miss Carrie W. Tennant.....	July 18, 1918	April 1, 1948
Mr. Grady S. Wingard.....	Jan. 1, 1924	Feb. 1, 1948
George Butler.....	Aug. 18, 1922	July 31, 1947
Alberta Nelson.....	Sept. 23, 1924	April 1, 1948
Annie Strong.....	April 1, 1936	June 30, 1948

### MEDICAL DEPARTMENT

The medical staff continued every effort to maintain the high standards attained by the hospital in spite of an inadequate number of physicians. Faithful and loyal services were rendered under handicaps, and gratitude is expressed to those who carried on under a steadily increasing patient load.

Four scheduled meetings of the medical staff were held each week for diagnostic and therapeutic consideration of all new cases and to consider the release or discharge of those improved or recovered.

The nursing corps is reduced to the extent that it is impossible to have a graduate nurse in many essential places.

The school of nursing still functions and will continue to do so, but the classes are small. This situation is universal and this hospital is no exception. When in a position to provide psychiatric nurse affiliation our problems will be minimized.

Dr. Lionelle Dudley Wells, Jr., an assistant physician employed September 8, 1947, resigned effective June 16, 1948 to accept a position with the U. S. Veterans' Hospital, North Little Rock, Arkansas. He is a graduate of the Medical College, State of South Carolina, Charleston, class of 1945, with nine months rotating internship at the Metropolitan Hospital, New York City. Lieut. Wells had sixteen months service in the Army, five of which were spent in Nagoya, Japan.

Dr. Newton Farr Garland reported as an assistant physician on April 15, 1948. A graduate of the Medical College, State of South Carolina, Charleston, class of 1944, he interned at the U. S. Marine Hospital, Staten Island, New York, for nine months. Lieut. Garland was in the Navy until June 12, 1946, and then a resident in surgery at the Baroness Erlanger Hospital, Chattanooga, Tennessee, until a few days before joining the medical staff. While attending the University of South Carolina he worked as an assistant technician in the laboratory at the S. C. State Hospital, and also during vacation periods while in medical school.

On September 1, 1947 Dr. Charles J. Lemmon, Jr., of Columbia, one of the outstanding specialists in his field, accepted the position of neurosurgeon on a part-time basis. A native of Sumter, S. C., he spent two years at the Medical College, State of South Carolina, Charleston, and graduated from Temple University Medical School, Philadelphia, in 1939. After interning at the Philadelphia General Hospital, residences were served in surgery at Toumey Hospital, Sumter, S. C., and Bellevue Hospital, New York City; and in urology at the Boston City Hospital. Dr. Lemmon was a Fellow in surgery and neurosurgery at the Lahey Clinic, Boston, and was in anesthesia for two months at this clinic. He studied pathology in the laboratory of Dr. Shields Warren, New England Deaconess Hospital (Lahey Clinic) Boston, Massachusetts. With the addition of Dr. Lemmon to the staff on a part-time basis the hospital is keeping



abreast of modern concepts of brain surgery for the relief of mental illness. This surgical procedure is being employed by him and will be more extensively used.

Dr. Wm. S. Hall, senior assistant physician, after successfully passing the required examination in Chicago, was on October 27, 1947 certified in psychiatry by the American Board of Psychiatry and Neurology, Inc.

Dr. Sol B. McLendon, senior assistant physician, was likewise certified in psychiatry by this Board on October 28, 1947 in Chicago when he met the requirements.

The administration takes considerable pride in the fact that six members of the medical staff are certified in the field of psychiatry by the American Board of Psychiatry and Neurology, Inc., one of the highest honors to be awarded in this specialty.

Dr. Williams, Dr. Ham, Dr. Carrigan and Dr. Westrope attended the annual session of the American Psychiatric Association in Washington, D. C., from May 17 through 21, 1948.

Beginning November 10, 1947, with the sixth and last group arriving May 10, 1948, the senior class, Medical College, State of South Carolina, spent one week each at the hospital attending clinics, lectures and staff conferences and securing clinical training in psychiatry.

On June 14, 1948 these junior medical students, Medical College, State of South Carolina, reported as junior interns during the summer: Misses C. Janet Hill and Mary M. Tribble; Messrs. Joseph Allen Tobin, Louis Preston Jervy, Jr., Harold Edw. Jervy, Jr., Waddy George Baroody, Jr., George Douglas Holman and Robert B. Larrick.

On August 11, 1947 the Columbia Medical Society, following the custom, held the monthly scientific meeting at the hospital with the medical staff entertaining the visitors at a dinner prior to the scientific session. The guest speaker was Dr. Olin B. Chamberlain of Charleston; president, South Carolina Medical Association; director, Department of Neuropsychiatry, Medical College, State of South Carolina; and a member, Board of Regents, South Carolina State Hospital, whose subject was "Psychiatry in the Older Age Group." Dr. Sol B. McLendon, the local essayist, spoke on "Psychotherapy in General Practice."

June 14, 1948 the medical staff again entertained the Columbia Medical Society at a dinner and for the scientific meet-

ing. The guest speaker was Dr. James S. New of Augusta, Georgia, whose subject was "Psychosomatic Medicine." Dr. McLendon presented a paper on "Depression States Occurring in the Negro."

The monthly meeting of the Southeastern Society of Neurology and Psychiatry was held February 3, 1948 at the hospital. Dr. Charles J. Lemmon, Jr., and Dr. Joe E. Freed of the staff presented a "Preliminary Report of Prefrontal Leukotomy Cases at the South Carolina State Hospital." Dr. Vincent L. Frankfurth of Augusta, Georgia, discussed "Psychiatric Rehabilitation." This society was organized in November 1947, the membership being composed of the neuropsychiatrists and allied scientists from the States of South Carolina and Georgia.

The medical staff continued an educational program even though handicapped by inadequate personnel. Lectures, clinical courses and visits through the hospital were arranged for classes in abnormal psychology from the University of South Carolina, Furman University, Clemson, Winthrop, Newberry and Wofford Colleges, and the Lutheran Theological Seminary.

Visits and lectures were arranged for provisional members of the Columbia Junior League, and those attending the Conference of Social Work.

Groups from many high schools throughout the State were conducted on educational tours through the hospital here and at State Park.

The Negro unit at State Park was visited by students from Allen University and Benedict College of Columbia; and the Industrial, Agricultural and Mechanical College at Orangeburg.

#### LABORATORIES

Wassermann on blood .....	2,488
Wassermann on blood other than patients .....	257
Wassermann on spinal fluid .....	677
Wassermann on spinal fluid other than patients .....	1
Routine examination of spinal fluid .....	677
Routine examination of spinal fluid other than patients .....	1

#### Kline on Blood:

Diagnostic .....	2,488
Diagnostic other than patients .....	257



**Kline on Spinal Fluid:**

Diagnostic .....	677
Diagnostic other than patients .....	1

**Blood:**

Bleeding time .....	1
Bromide .....	1,266
Calcium .....	5
Clotting time .....	2
Coagulation time .....	12
Color index .....	2
Erythrocyte .....	380
Glucose tolerance test .....	2
Hemoglobin .....	425
Icterus index .....	59
Leucocyte .....	418
Matching and cross matching .....	53
Rh determination .....	53
Sedimentation rate .....	16
Sugar .....	1,147
Sulfadiazine concentration .....	2
Typing .....	120
Urea nitrogen .....	321
Van den Bergh .....	7

**Cultures:**

Blood .....	3
Cervical .....	2
Ear .....	1
Eye .....	8
Spinal .....	4
Urine .....	3

**Smears:**

Eye .....	2
Leg .....	1
Malaria .....	4
Skenes .....	1
Sputum .....	64
Urethral .....	7
Vaginal .....	12

**Analysis:**

Gastric .....	2
Urinalysis .....	2,321

**Miscellaneous:**

Blood in feces .....	2
Colloidal gold .....	138
Feces .....	2
Globulin .....	2
Pleocytosis .....	12
Spinal chloride .....	1
Spinal differential .....	2
Spinal protein .....	3
Spinal sugar .....	4
Urobilin in feces .....	1

**X-Ray Laboratory:**

Electrocardiogram .....	44
Deep therapy treatment .....	81
X-ray exposures .....	2,588

**Basal Metabolism Rate:**

Basal metabolism rate .....	10
Autopsies .....	76
Miscroscopic sections .....	1,250
Surgical specimens examined macroscopically and mi- croscopically .....	61

**PERCENTAGE OF POSITIVE BLOOD WASSERMANNs**

White Men			White Women			Negro Men			Negro Women		
Positive	Negative	Per Cent	Positive	Negative	Per Cent	Positive	Negative	Per Cent	Positive	Negative	Per Cent
41	662	5.80	14	640	2.1	68	330	17.08	81	395	17.00

**PERCENTAGE OF POSITIVE SPINAL FLUID WASSERMANNs**

33	145	18.53	12	46	20.68	61	296	17.08	13	69	15.85
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## SYPHILITIC MENINGO ENCEPHALITIS

### (General Paresis)

All patients admitted to the hospital and those returned are given complete examinations. When any leutic infection is found treatment is immediately instituted and continued in an effort to effect a cure.

Malaria therapy is given in all cases of syphilitic meningo encephalitis, unless contra indicated.

From the following table will be seen the encouraging results in that group of patients for whom no hope was offered prior to the use of malaria therapy.

	White Men	White Women	Negro Men	Negro Women	Total
Remission .....	3	1	14	1	19
Improved .....	22	4	18	2	46
Unimproved .....	3	1	3	..	7
Died .....	5	1	7	5	18
TOTAL .....	33	7	42	8	90

## RESEARCH IN PARASITOLOGY

During this year this department was without technical help most of the time and as a result little could be accomplished in the way of research. One program was begun, but it was not possible to carry it to completion.

Stool examinations were made of the majority of patients entering the hospital, of those whom we intended to treat and of many who were suspected of having intestinal infections as causes of their illnesses. In addition, stool and anal swab examinations were made of many employees and members of their families who were suspected of having infections.

The results of the year's examinations of patients are as follows:

	White Men	White Women	Negro Men	Negro Women	Total
No. of stool examinations made .....	562	489	58	62	1,171
Patients with:					
Endamoeba histolytica .....	18	23	3	6	50
Endamoeba coli .....	63	32	11	31	197
Iodamoeba williamsi .....	5	1	1	2	9
Endolimax nana .....	74	63	13	11	161
Dientamoeba fragilis .....	15	11	..	..	26
Chilomastix mesnili .....	4	6	..	3	13
Trichomonas hominis .....	14	17	..	4	35
Trichomonas vaginalis .....	..	2	..	..	2
Giardia lamblia .....	22	10	3	2	37
Ascaris lumbricoides .....	1	6	1	8	16
Necator americanus .....	44	42	5	14	105
Strongyloides stercoralis .....	6	14	1	11	32
Enterobius vermicularis .....	..	1	..	..	1
Trichuris trichiura .....	..	25	..	17	42
Hymenolepis nana .....	2	..	..	..	2
Patients with:					
No species of parasites .....	378	319	34	19	750
1 species of parasites .....	118	93	16	19	246
2 species of parasites .....	49	44	5	3	101
3 species of parasites .....	16	17	1	8	42
4 species of parasites .....	1	9	1	7	18
5 species of parasites .....	..	3	1	4	8
6 species of parasites .....	..	..	..	2	2
7 species of parasites .....	..	3	..	..	3
9 species of parasites .....	..	1	..	..	1
No. of vaginal smear examinations made .....	..	1	..	..	1
Trichomonas vaginalis present .....	..	1	..	..	1

The results of this year's examinations of employees and others are as follows:

No. of stool examinations made .....	35
No. with: Endamoeba histolytica .....	3
Endamoeba coli .....	2
Endolimax nana .....	2
Chilomastix mesnili .....	1
Ascaris lumbricoides .....	2
Trichuris trichiura .....	6
No. with: No species of parasites .....	24
1 species of parasites .....	6
2 species of parasites .....	5
No. anal swab examinations made .....	15
Enterobius vermicularis found .....	5
Negative .....	10



## UROLOGICAL WORK

	Patients					Employees		
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Total
Bladder irrigations .....	2	42	2	2	42	2	2	2
Cystoscopic examinations .....	2	10	2	2	12	2	8	10

## ANTI-SYPHILITIC TREATMENTS

DOSES	White Men	White Women	Negro Men	Negro Women	Total
Aldarsone .....	....	130	470	....	600
Bismarsen .....	53	....	....	214	267
Bismuth sodium tartrate .....	237	32	....	453	722
Malaria .....	36	13	89	6	144
Mapharsen .....	232	204	365	271	1,072
Thio bismol .....	45	316	609	....	970
Tryparsamide .....	143	....	....	....	143
TOTAL .....	746	695	1,533	944	3,918

## ELECTRO-SHOCK THERAPY

The continued shortage of medical personnel and the time consuming element necessarily limited this type of therapy to only certain selected cases. Electro-shock is of great value in certain mental disorders and as soon as possible will be more extensively used.

	White Men	White Women	Negro Men	Negro Women	Total
Recovered .....	4	1	..	..	5
Markedly improved .....	22	47	..	..	69
Improved .....	69	112	..	..	181
Unimproved .....	28	64	..	..	92
TOTAL .....	123	224	..	..	347

	PATIENTS					EMPLOYEES				
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total
EYES—										
Cancer, eyelid .....	..	1	..	..	1	..	..	..	..	..
Cataract operation .....	1	2	..	..	3	..	..	..	..	..
Chalazion .....	1	..	..	..	1	..	..	..	..	..
Corneal ulcer .....	4	3	..	..	7	..	..	..	..	..
Enucleation, eyeball .....	1	..	..	..	1	..	..	..	..	..
External diseases .....	43	25	1	3	72	15	6	7	10	38
Eye ground examinations .....	693	507	311	321	1,832	..	..	5	1	6
Foreign bodies removed .....	..	..	1	1	2	1	2	..	..	3
Glaucoma .....	..	..	1	1	2	..	..	..	..	..
Injuries .....	11	4	..	..	15	1	..	2	..	3
Keratitis uveitis .....	8	1	..	..	9	..	..	1	..	1
Keratotomy .....	1	..	..	..	1	..	..	..	..	..
Paracentesis .....	1	..	..	..	1	..	6	..	..	6
Pterygium .....	1	..	..	..	1	..	..	..	..	..
Refractions, cycloplegic .....	34	21	..	..	55	20	11	18	18	67
Refractions, simple .....	44	38	1	1	84	14	18	7	20	59
Routine inspections .....	119	58	5	3	185	3	4	21	32	60
Slit lamp examinations .....	3	3	..	..	6	..	..	..	..	..
Visual fields .....	4	..	..	..	4	1	..	..	..	1
Glasses furnished by the South Carolina State Hospital .....	10	2	..	..	12	..	..	..	..	..
EARS—										
Cancer .....	1	1	..	..	2	..	..	..	..	..
Cerumen removed .....	1	1	..	..	2	..	..	..	..	..
Foreign bodies removed .....	2	..	..	..	2	1	..	..	..	1
Hearing test .....	1	..	..	..	1	..	..	..	..	..
Injuries .....	3	1	..	..	4	..	..	..	..	..
Irrigations .....	1	..	..	..	1	..	..	..	..	..
Myringotomy .....	..	1	..	..	1	..	..	..	..	..
Otitis externa .....	14	7	1	2	24	3	4	..	1	8
Otitis media .....	31	28	..	1	60	3	5	..	1	9
Routine examinations .....	727	533	..	..	1,260	1	1	..	1	3
NOSE AND THROAT—										
Biopsy, larynx, cancer .....	..	1	..	..	1	..	..	..	..	..
Bronchoscopy .....	..	1	..	..	1	..	..	..	..	..
Epistaxis .....	3	..	..	..	3	..	..	..	..	..
Foreign bodies removed .....	1	3	1	..	5	..	..	..	..	..
Injuries .....	1	..	..	..	1	..	..	..	..	..
Laryngitis .....	3	5	..	..	8	..	1	..	..	1
Naso-pharyngitis .....	6	2	..	..	8	..	..	..	..	..
Nasal polyp removed .....	1	..	..	..	1	..	..	..	..	..
Routine examinations .....	721	537	..	..	1,258	2	2	1	5	10
Sinusitis .....	6	13	1	1	21	1	10	1	4	16
Tonsillitis .....	10	9	5	..	24	4	8	8	2	22
Tonsillectomies .....	..	..	..	..	..	1	..	..	..	1
Cultures, smears and X-ray examinations made whenever indicated.										



## DENTAL WORK

Examinations .....	2,990
Anesthetics .....	2,427
Extractions .....	3,033
Treatments .....	440
Acrylic inlays made .....	1

## Bridges:

Made .....	1
Removed .....	9
Reset .....	4

## Dentures:

Made .....	72
Partial made .....	10
Partial repaired .....	3
Repaired .....	27

## Fillings:

Alloy .....	147
Porcelain .....	63
Temporary .....	3
Gold crowns removed .....	5

## Gold inlays:

Made .....	4
Reset .....	2
Impactions removed .....	28
X-ray exposures .....	161
Tooth brushes distributed .....	1,526
Requisitions—for money needed for dental work .....	66
Deposits—money received for dental work .....	76

## SURGICAL DEPARTMENT

Operations performed by the consulting and resident staff are found in the following tables:

Appreciation is expressed to the consulting staff for continued cooperation and ready response to every call.

	Patients					Employees				
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Women	Total	
Blood transfusion .....	2	3	..	..	5	2	..	..	2	
Bronchoscopy .....	1	..	..	..	1	..	..	..	..	
Biopsy, tumor:										
Ankle .....	..	..	2	..	2	..	..	..	..	
Heel .....	..	2	..	2	4	..	..	..	..	
Pelvis .....	..	1	..	..	1	..	..	..	..	
Rectum .....	..	..	..	1	1	..	..	..	..	
Neck .....	1	2	..	3	6	..	..	..	..	
Vaginal cyst .....	..	1	..	..	1	..	..	..	..	
Cholelithotomy .....	1	..	..	..	1	..	..	..	..	
Dilatation and curettage .....	..	..	..	..	..	..	2	..	2	
Excision:										
Cyst eyelid .....	1	1	..	..	2	..	..	..	..	
Sebaceous cyst neck .....	1	1	..	..	2	..	..	..	..	
Toe nail .....	1	1	..	..	2	..	..	..	..	
Tumor neck .....	..	..	..	5	5	..	..	..	..	
Gastrostomy .....	1	..	..	..	1	..	..	..	..	
Hemorrhoidectomy .....	1	..	..	..	1	..	..	..	..	
Herniotomy .....	..	1	..	2	3	1	..	..	1	
Hysterectomy .....	..	..	..	2	2	..	1	2	3	
Incision and drainage abscess:										
Breast .....	..	1	..	..	1	..	..	..	..	
Buttock .....	..	1	..	..	1	..	..	..	..	
Face .....	..	..	..	2	2	..	..	..	..	
Hand .....	..	1	..	..	1	..	..	..	..	
Incision, drainage and removal cyst:										
Demoid, abdominal cavity .....	..	1	..	..	1	..	..	..	..	
Sebaceous cyst										
Coccyx .....	1	..	..	..	1	..	..	..	..	
Ear .....	1	..	..	..	1	..	..	..	..	
Leg .....	1	..	..	..	1	..	..	..	..	
Neck .....	1	..	..	..	1	..	..	..	..	
Shoulder .....	..	..	..	1	1	..	..	..	..	
Incision and removal sebaceous cyst, wrist..	..	..	..	..	..	..	1	..	1	
Ligation and injection, varicose veins .....	..	..	..	..	..	..	2	..	2	
Mastectomy .....	..	..	..	4	4	..	..	..	..	
Prefrontal leukotomy .....	1	19	..	..	20	..	..	..	..	
Perineorrhaphy and hemorrhoidectomy .....	..	1	..	..	1	..	..	..	..	
Removal and cauterization warts of penis and pubic region .....	..	..	1	..	1	1	..	..	1	
Repair hairlip .....	1	..	..	..	1	..	..	..	..	
Skin grafting, head .....	..	..	..	..	..	2	..	..	2	
Thyroidectomy .....	..	..	..	2	2	..	..	..	..	
Ureterolithotomy .....	..	1	..	..	1	..	..	..	..	
TOTAL .....	16	38	3	24	81	6	12	2	20	



## ORTHOPEDICS

	Patients					Employees		
	White Men	White Women	Negro Men	Negro Women	Total	Negro Men		Total
Amputation, right foot .....	..	1	..	..	1	..		..
Application of cast for purpose of giving electro shock therapy .....	..	1	..	..	1	..		..
Closed reduction and application of cast for fracture:								
Ankle .....	1	..	..	..	1	..		..
Fibula .....	..	..	1	..	1	..		..
Finger .....	..	..	..	1	1	..		..
Hand .....	..	..	..	..	..	1		1
Hip .....	1	1	..	..	2	..		..
Tibia .....	..	1	1	..	2	..		..
Ulna .....	..	1	..	..	1	..		..
Wrist .....	2	9	1	5	17	..		..
Fracture, phalanx, finger .....	1	..	..	..	1	..		..
Incision and removal of steel pins:								
Ankle .....	..	2	..	..	2	..		..
Hip .....	..	3	..	..	3	..		..
Incision and removal of plate:								
Hip .....	..	..	1	1	2	..		..
Incision and removal, patella .....	..	1	..	..	1	..		..
Infusion of spine .....	..	1	..	..	1	..		..
Open reduction and application of cast for fracture:								
Ankle .....	..	..	1	..	1	..		..
Humerus .....	2	..	1	1	4	..		..
Patella .....	3	..	..	..	3	..		..
Wrist .....	1	..	..	..	1	..		..
Open reduction and steel pin fixation for fracture:								
Ankle .....	..	..	1	..	1	..		..
Hip .....	3	7	..	..	10	..		..
Open reduction and blade plate fixation for fracture:								
Hip .....	11	7	..	..	18	..		..
Reduction, dislocated shoulder .....	1	..	..	..	1	..		..
TOTAL .....	26	35	7	8	76	1		1

Open reduction and application of bandage for compound fracture, 1st, 2nd and 3rd phalanx, foot—Negro boy from John G. Richards Industrial School, employed at the Columbia Dairy.

## SPECIAL TREATMENT

	PATIENTS		EMPLOYEES	
	White Women	Total	White Women	Total
Infra Red Light for Back .....	4	4	2	2
TOTAL .....	4	4	2	2

## SOCIAL SERVICE

The one social service worker devoted practically her entire time to securing information relative to the steadily increasing number of court cases, and to emergencies.

The lack of personnel continued to seriously handicap the activities of this department.

## LIBRARY

The full time librarian, ably assisted by committees of patients, continued efforts to create interest in more extensive reading, in making scrap books, having discussion groups, musical programs, and spelling matches.

Reading clubs stimulated interest throughout the hospital, and regular definite programs of book reviews, story telling, current events, compositions, and musical selections by patients were of therapeutic value.

On two occasions the Library Club presented special programs in the auditorium.

Several patients assisted in the library, arranging magazines, cataloging and mending books, etc.

Deep appreciation is expressed to the Richland County Library for supplying reading material; and to numerous friends for generous donations of books and magazines, and specific gifts of money for library purposes.

## RELIGIOUS ACTIVITIES

The resident chaplain, Rev. J. Obert Kempson, continued regular services each Sunday in the two chapels in the city for white patients; and each Sunday afternoon at State Park for the Negro patients. Weekly prayer and song services and religious movies were conducted on the wards for those unable to attend the Sunday services.

Worship and discussion periods were conducted each week at the Mills Building (Nurses' Home) for the nurses.

Rev. Kempson officiated at the funerals of patients interred in the hospital cemeteries; and attended staff meetings.

Thanksgiving and Christmas he held special services in the chapels and on the wards; and directed the showing of appropriate movies throughout the hospital. A Christmas pageant was presented in the auditorium by patients.

Through the efforts of the chaplain a number of churches in the city and elsewhere generously provided gifts for patients. Ministers from the city were frequent visitors; and quite often arranged special services for members of their denominations. Those throughout the State were attentive to their respective members.

From June 1 through August 1947 Rev. Kempson was at St. Elizabeth's Hospital, Washington, D. C., for intensive training



under the direction of the Council for Clinical Training, Inc., New York. He also served as assistant chaplain and assistant supervisor in the program of training for theological students.

He was elected president of the newly organized Association of Mental Hospital Chaplains at the first session held May 17-20, 1948 in Washington, D. C. This met during the annual meeting of the American Psychiatric Association in order that the chaplains might attend sessions open to the public.

In January 1948 Rev. Kempson was certified by the Council for Clinical Training, Inc., New York, as a trained mental hospital chaplain and as a supervisor of clinical pastoral training. The hospital is one of thirteen in the United States accredited as a pastoral training center.

On June 7, 1948 a group of theological students began here, under the supervision of the chaplain, a course in clinical pastoral training and practical ward experience under the auspices of the South Carolina State Hospital and the Council for Clinical Training, Inc.

The students were Messrs. C. Paul Bush, Jr., of Wray, Georgia, from the Union Theological Seminary, New York; Bernard A. Jennings of Brownsville, Maryland; Anselmo Carral of Ciego de Avila, Cuba; Ralph W. Smith, Jr., Bluefield, West Virginia; and Rhett Y. Winters, Jr., of Washington, D. C., all from the Virginia Theological Seminary, Alexandria, Virginia.

### CHURCH BUILDING FUND

The fund for the proposed church on the hospital grounds which was begun by patients in November 1943 with the approval of the Board of Regents, has about reached the \$30,000.00 necessary to be matched by the permanent fund first appropriated by the 1946 General Assembly, to be available when building conditions permit.

Construction costs have so increased that the required amount will be much more than anticipated, but the continued generosity and cooperation of patients, relatives, friends and churches will soon make the necessary fund available.

### DIVERSIONS

The continued shortage of nursing and attendant personnel curtailed to some extent the amusement and diversion activities

for the patients. This therapy is of such value that every effort is exerted to provide entertainment for the greatest possible number of patients.

Through the courtesy of the officials of both the white and the Negro State Fair Associations 375 white and 672 Negro patients attended these annual events.

Weekly dances and moving pictures, frequent band concerts on the grounds and in the dining halls, baseball games, fruit and watermelon parties, and regular visits to nearby shops and into the city were provided. The portable moving picture machine brought pleasure to those unable to go to the auditorium.

Special attractions were the Hallowe'en party and dance, Christmas dance and programs on the wards, and a pageant presented by white patients in the auditorium. A special movie appropriate to the Christmas season was shown in the auditorium and on the wards here and at State Park.

Thanksgiving afternoon and again at Christmas the Library Club, composed of white patients, presented in the auditorium an enjoyable program of music and stories.

### SCHOOLS OF NURSING

Difficulties were still encountered in securing applicants qualified to meet the requirements. However, the School of Nursing for White Women continued to function with two young women completing the two years training here and one year affiliation course at Roper Hospital, Charleston.

Because of unavoidable delays the annual graduation exercises could not be held until after June 30, 1948, and will, therefore, appear in next year's report.

The School of Nursing for Negro Women has been temporarily discontinued due to the impossibility of securing young women of this group with sufficient preliminary training to meet the requirements prescribed by the National League of Nursing Education and the Committee on Psychiatric Nursing, American Psychiatric Association.

### HOSPITAL EDUCATIONAL ACTIVITIES

Efforts to better inform the general public and special groups as to preventive measures and therapy in mental illness were continued to a certain extent.



Comments will be found elsewhere in this report as to programs arranged for students from the Medical College, State of South Carolina, Charleston; those from the abnormal psychology and sociology classes of the University of South Carolina, Furman University, Clemson, Winthrop, Newberry and Wofford Colleges, and the Lutheran Theological Seminary, the State Conference of Social Workers, and provisional members of the Columbia Junior League.

The Columbia Medical Society held two regular monthly scientific sessions at the hospital with staff members in charge of the program.

The clinical meeting of the Southeastern Society of Neurology and Psychiatry met here with papers presented by staff members.

A selected group of five theological students was given a course in clinical pastoral training and practical ward experience.

### MENTAL HYGIENE CLINICS

A complete account of the activities of the Department of Mental Hygiene will be found elsewhere.

The first clinic under the new program was initiated in Charleston July 1, 1947 in conjunction with the Department of Neuropsychiatry, Medical College, State of South Carolina. Valuable services have been rendered with the demands beyond expectation and the clinic is handicapped because of inadequate space. This will be provided when the new teaching hospital at the Medical College is constructed.

The Spartanburg mental hygiene clinic initiated December 8, 1947 has likewise rendered valuable services although not taking care of the problem as there is only a part-time psychiatrist.

Other such centers will be established as soon as possible; the need for this assistance with mental problems being emphasized by the daily urgent requests from the medical profession, individuals, state and county mental hygiene societies and other organizations and schools.

### REORGANIZATION BUSINESS METHODS

The growth of the hospital and the increased volume of business transactions necessitated changes in business methods. Com-

plete transition into a most modern system now enables the administration to know at all times the status and activities of each and every department.

The State Auditor, Mr. James M. Smith, and his associates advised and worked diligently with us in effecting these major changes, and the new system went into effect on July 1, 1948. Deep appreciation is expressed to the State officials and the hospital personnel who participated.

### **BUSINESS MANAGER**

In line with the reorganization of the business administration and as the result of the growth and increased operations, the Board of Regents directed creating the position of business manager. The superintendent was fortunate in securing Mr. Lauren W. Shelley of Columbia, S. C. A native of Marion County, graduate of Clemson College in agronomy with post graduate work in soil fertility at the Iowa State College, he has been regional manager, Federal Land Bank, deputy administrator, war finance administrator for South Carolina, and chief appraiser, Loan and Guaranty Section, Veterans' Administration. Because of his training and experience Mr. Shelley is well qualified to handle the responsibilities assumed on June 1, 1948. This position will prove to be an economic measure and will also promote smooth operations in a rapidly growing institution.

### **TREASURER**

On July 1, 1948 Mr. T. F. Stevenson, Sr., succeeded as treasurer, Mr. H. T. Patterson, retired. Having been connected with the treasurer's office since April 22, 1922, with thorough training and years experience he is well fitted for his new duties.

### **PERSONNEL OFFICER**

Realizing the importance of keeping adequate records of rapidly changing personnel, particularly in the nursing and attendant corps, the Board of Regents directed creating the position of personnel officer. We were fortunate in having in the treasurer's department as chief clerk, Mr. John W. Whitehouse.

He is a veteran of World War II, attaining the rank of captain, and when separated was personnel officer at Wakeman



General and Convalescent Hospital, Camp Atterbury, Indiana, one of the largest in the country. His training and experience well qualified him for the position assumed on June 1, 1948.

### VISITORS

Hon. Wm. P. Baskin, chairman, and members of the Medical Affairs Committee, State Senate, together with Hon. S. Rhea Haskell, chairman, and members of the S. C. State Hospital Committee, House of Representatives, made a thorough inspection of the hospital.

Many other members of the General Assembly visited here from time to time.

Dr. Olin B. Chamberlain of Charleston, president, South Carolina Medical Association; director, Department of Neuropsychiatry, Medical College, State of South Carolina; and a member, Board of Regents, S. C. State Hospital, was the guest speaker when the medical staff entertained the Columbia Medical Society on August 11, 1947.

Dr. James S. New, psychiatrist from Augusta, Georgia, was the guest speaker when the Columbia Medical Society met here on June 14, 1948.

Dr. Vincent L. Frankfurth of Augusta, Georgia, was the honor guest at the session of the Southeastern Society of Neurology and Psychiatry held here February 3, 1948.

Dr. W. K. Sharp, director, District Two, U. S. Public Health Service, Richmond, Va., visited the hospital on several occasions in the interest of the mental health program in South Carolina.

Dr. Curtis G. Southard, neuropsychiatric consultant, District Three, U. S. Public Health Service, Washington, D. C., came several times in the interest of the developing mental hygiene program.

Dr. Walter Freeman of Washington, D. C., pioneer in the United States in brain surgery in mental therapy, visited the hospital in June as the guest of the superintendent, who in the incipency of this surgical procedure accompanied several patients to Washington for the operation, and to observe the technique.

## FIRE DEPARTMENT

A well equipped fire department continues to be maintained with systematic inspections of the entire hospital made throughout the year.

Again gratitude is expressed to Chief A. McC. Marsh and the Columbia Fire Department for efficiency, assistance and co-operation which mean security.

## UNITED STATES PUBLIC HEALTH SERVICE

The United States Public Health Service continues to maintain a laboratory for malaria research at the South Carolina State Hospital under the direction of Dr. Martin D. Young, whose report is given elsewhere.

The central location of this laboratory from a geographical standpoint facilitates the rapid distribution of malaria material for therapeutic purposes and the rendering of other valuable service to many mental and general hospitals.

## ACKNOWLEDGMENTS

Sincere gratitude is expressed for the support, encouragement and wise counsel of the Board of Regents.

There is deep appreciation to the various state officials for cooperation and assistance given.

Sources of much satisfaction are the earnest efforts of the officers and other personnel who, often under difficult conditions because of the shortage of employees, loyally rendered valuable services. To each one the administration is grateful.

The hospital is indebted to the many organizations and individuals for assistance and contributions of various kinds; and for the liberal response to the appeals for gifts at Christmas and for funds for the proposed church.

Thanks are expressed to the officials of both the white and the Negro State Fair Associations for the many courtesies to our patients.

Respectfully submitted

COYT HAM, M.D.  
Superintendent



## REPORT OF ARCHITECTS

July 1, 1948

Dr. Coyt Ham, Superintendent  
S. C. State Hospital  
Columbia, S. C.

Dear Dr. Ham:

We submit herewith our report for the year ending June 30, 1948, covering construction program under our charge at the South Carolina State Hospital.

The Act appropriating funds for construction work at the various State Institutions having been signed by the Governor, the Board of Regents immediately started studying the needs of the State Hospital. Listed as urgent were the following items:

- (a) Weatherproofing of Williams Building and Research Laboratory Building.
- (b) Steam Heating System in Building No. 1 at State Park.
- (c) Extension to Sewer System at State Park.
- (d) New Ice Plant in Columbia, S. C.
- (e) Extension of High Pressure Steam to Buildings Numbers 1, 2, 3 and 4, in Columbia and the removal of old hot air furnaces, substituting steam coils for heating in these buildings.
- (f) Construction of Maximum Detention Building in Columbia, S. C.
- (g) Construction of Women's Hospital and Receiving Ward Building at State Park.
- (h) Alterations in Administration Building, Columbia, for New Treasurer's Office.

It is proposed to construct all the new buildings in conjunction with the Hill-Burton Hospital Construction Act which is being administered in South Carolina by the S. C. State Board of Health, headed by Dr. Ben F. Wyman and Dr. C. L. Guyton. Under this program the state will pay two-thirds and the Government one-third of the cost of construction and equipment. Applications to the Board of Health will be prepared as soon as the projects are sufficiently developed to arrive at the approximate cost.

The Board of Regents appointed engineers to design the Ice Plant in Columbia and Extensions to the Sewer System at State Park. We were retained as architects for the balance of the program.

Dr. Ham and R. S. Lafaye went on a trip to Milledgeville, Georgia, for the purpose of inspecting the new buildings completed at that institution. The program which started several years ago is about completed and cost approximately \$6,000,000. The buildings are modern in every respect and while their technique is somewhat different, there were items of construction which were new and we feel that the trip was well worthwhile.

The working plans were originally made for the Maximum Detention Building in 1941. This building could not be constructed at that time. Study of these plans, together with suggestions from the Public Health Service has made it desirable to completely re-design this building. These sketches are under way and are being carefully studied. It is our suggestion that before working plans are started on this building that the details be thoroughly worked out, not only with the State Hospital, but in conformity with the requirements of the Public Health Service.

The sketches for the new Hospital and Receiving Ward at State Park are being studied and developed in the same manner. Contract was awarded to the Guaranteed Waterproofing Company of Atlanta, Georgia, for weatherproofing the Williams Building and the Research Laboratory Building. The contract was awarded on April 8, 1948, their contract sum being \$7,549.00. This work has been satisfactorily completed.

On May 5, Part 1 of application for Maximum Detention Building was submitted to the Hospital Division. On May 27, 1948, the Board approved preliminary plans and instructed the superintendent to submit applications to the Hospital Division for the following items:

(a) Heating Building No. 1, State Park—Estimated Cost—\$30,000.

(b) Sewage Disposal System, State Park—Estimated Cost—\$85,000.



(c) Maximum Detention Building, Columbia, S. C.—Estimated Cost—\$414,000.

(d) High Pressure Steam Distribution, Columbia, S. C.—Estimated Cost—\$56,000.

Plans for the heating, Building No. 1 were completed at State Park and contract was awarded to W. B. Guimarin and Company of Columbia on June 17, 1948. Their contract sum was \$15,725.00. Work on this contract is to be completed in time for the heating season of 1948.

We are preparing plans for the Extension of High Pressure Steam to Buildings Numbers 1, 2, 3 and 4 in Columbia. This contract cannot be awarded and the work completed in time for the 1948 heating season, therefore, contracts will be awarded in the spring of 1949 for this work.

Respectfully submitted

LAFAYE, LAFAYE & FAIR  
R. S. Lafaye

RSL:fr

# Statistical Tables

## PSYCHOSES OF FIRST ADMISSIONS

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Psychoses with Syphilitic Meningo-Encephalitis (general paresis)....	31	10	62	17	120
Psychoses with Other Forms of Syphilis of the Central Nervous System .....	1	1	2	..	4
Cerebral syphilis .....	..	1	1	..	2
Tabes paresis .....	1	..	1	..	2
Psychoses with Epidemic Encephalitis .....	..	3	..	..	3
Alcoholic Psychoses .....	38	12	9	2	51
Pathological intoxication .....	10	..	12	..	12
Delirium tremens .....	22	1	12	1	26
Deterioration .....	2	1	..	..	3
Acute hallucinosis .....	3	..	5	1	9
Chronic alcoholism .....	1	..	..	..	1
Psychoses Due to Drugs or Other Exogenous Poisons .....	9	4	..	..	13
Due to opium and derivatives .....	9	4	..	..	13
Traumatic Psychoses .....	4	..	1	..	5
Post-traumatic personality disorders .....	3	..	..	..	3
Convulsive disorder .....	1	..	1	..	2
Psychoses with Cerebral Arteriosclerosis .....	57	56	64	49	226
Psychoses with Other Disturbances of Circulation .....	27	6	14	3	50
Cardio-renal disease .....	27	6	14	3	50
Psychoses with Convulsive Disorders (Epilepsy) .....	14	12	12	9	47
Deterioration .....	13	11	10	8	42
Clouded states .....	1	1	2	1	5
Senile Psychoses .....	25	20	12	9	66
Simple deterioration .....	18	11	11	8	48
Delirious and confused .....	1	..	..	..	1
Depressed and agitated .....	2	6	..	..	8
Paranoid .....	4	3	1	1	9
Involutional Psychoses .....	17	55	..	2	74
Melancholia .....	12	41	..	1	54
Paranoid .....	4	14	..	1	19
Trauma .....	1	..	..	..	1
Psychoses Due to Other Metabolic, etc., Diseases .....	3	5	1	3	12
Alzheimer's disease .....	1	..	..	..	1
Pellagra .....	..	1	..	..	1
Other somatic diseases .....	2	4	1	3	10
Psychoses Due to New Growth .....	..	1	..	..	1
Intracranial neoplasms .....	..	1	..	..	1
Psychoses Associated with Organic Changes of the Nervous System..	1	5	..	1	7
Paralysis agitans .....	..	2	..	..	2
Pick's disease .....	1	3	..	..	4
Undetermined .....	..	..	..	1	1
Psychoneuroses .....	41	88	2	5	136
Hysteria .....	19	41	..	..	60
Psychasthenia .....	1	3	..	..	4
Neurasthenia .....	5	4	..	..	9
Hypochondriasis .....	4	..	..	..	4
Reactive depression .....	6	13	1	4	24
Anxiety state .....	2	23	1	1	27
Mixed .....	4	4	..	..	8
Manic-Depressive Psychoses .....	50	34	24	38	146
Manic .....	33	22	21	34	110
Depressive .....	15	12	2	2	31
Mixed .....	1	..	..	2	3
Perplexed .....	1	..	1	..	2
Dementia Praecox (Schizophrenia) .....	50	71	60	54	235
Simple .....	3	1	..	..	4
Hebephrenic .....	14	11	24	22	71
Catatonic .....	12	44	29	22	107
Paranoid .....	20	15	7	10	52
Other types .....	1	..	..	..	1
Paranoia and Paranoid Conditions .....	6	9	..	2	17
Paranoia .....	1	..	..	..	1
Paranoid conditions .....	5	9	..	2	16
Psychoses with Psychopathic Personality .....	3	..	1	..	4
Psychoses with Mental Deficiency .....	12	10	10	10	42
Undiagnosed Psychoses .....	6	2	1	..	9
Total with Psychoses .....	395	394	275	204	1,268

(Continued)



## PSYCHOSES OF FIRST ADMISSIONS (Continued)

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Without Psychoses:					
Alcoholism .....	84	11	2	2	99
Convulsive disorders .....	2	..	1	..	3
Drug addiction .....	6	..	..	..	8
Mental deficiency .....	9	16	9	37	
Physical condition .....	5	3	3	1	12
Primary behavior disorders:					
Conduct disturbance .....	..	1	..	..	1
Neurotic traits .....	1	..	..	..	1
Simple adult maladjustment .....	..	3	..	..	3
Psychopathic personality .....	23	2	1	..	26
Without mental disorder .....	18	2	14	4	38
Total without Psychoses .....	148	27	37	16	228
GRAND TOTAL .....	543	421	312	220	1,496

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
WHITE RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over			Unascertained			
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T				
Psychoses with syphilitic meningo-encephalitis (general paresis)	31	10	41	..	..	..	..	..	..	1	..	1	1	..	1	3	..	3	5	3	8	4	2	6	5	3	8	4	2	6	5	..	5	1	..	1	2	..	2	..	..	..	..	..		
Psychoses with other forms of syphilis of the central nervous system	1	1	2	..	..	..	..	..	..	..	1	1	..	..	..	..	..	1	..	1	1	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses with epidemic encephalitis	..	3	3	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	1	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..
Alcoholic psychoses	38	2	40	..	..	..	..	..	..	1	1	2	2	..	2	8	..	8	9	1	10	3	..	3	7	..	7	4	..	4	4	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses due to drugs or other exogenous poisons	9	4	13	..	..	..	..	..	..	..	..	..	1	1	2	1	..	3	2	1	3	1	..	1	1	1	1	1	1	..	1	1	..	..	..	..	1	..	..	..	..	..	..	..	..	
Traumatic psychoses	4	..	4	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses with cerebral arteriosclerosis	57	56	113	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1	1	2	3	1	2	3	1	2	3	1	2	3	4	6	10	12	10	22	20	19	39	18	14	22	..	..	
Psychoses with other disturbances of circulation	27	6	33	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	1	1	2	..	1	2	..	2	2	1	1	2	4	1	5	9	1	10	12	..	..	..	..	
Psychoses with convulsive disorders (epilepsy)	14	12	26	1	..	1	3	3	6	2	2	4	1	1	2	4	2	..	6	3	1	4	..	1	1	..	..	..	..	..	..	..	1	1	1	..	1	..	..	..	..	..	..	..	..	
Senile psychoses	25	20	45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	24	20	44	..	..	1	..	
Involuntional psychoses	17	55	72	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	3	17	18	3	15	18	6	15	21	6	5	11	2	1	1	..	1	..	..	..	..	..	..	..	..	..	..	
Psychoses due to other metabolic, etc., diseases	3	5	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses due to new growth	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses associated with organic changes of the nervous system	1	5	6	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychoneuroses	41	88	129	..	..	..	7	1	8	4	14	18	3	15	18	7	22	29	5	12	17	6	9	15	6	2	8	1	5	6	3	3	4	4	4	1	2	3	1	2	3	..	..	..	..	..
Manic-depressive psychoses	50	34	84	1	1	2	5	1	6	3	6	9	1	5	6	7	4	11	7	8	15	6	5	11	7	3	3	10	5	..	5	4	..	4	4	1	1	2	1	..	1	2	..	..	..	..
Dementia praecox (schizophrenia)	50	71	121	..	1	1	7	4	11	16	11	27	9	21	30	10	14	24	34	17	20	3	3	6	2	2	2	10	5	..	5	4	..	4	4	1	1	2	1	..	1	2	..	..	..	..
Paranoia and paranoid conditions	6	9	15	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	1	1	1	1	1	3	2	5	1	3	4	..	1	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Psychoses with psychopathic personality	3	..	3	..	..	..	1	..	2	1	..	3	4	1	4	5	1	..	1	2	..	2	1	1	3	1	4	..	..	..	..	..	..	..	1	1	2	..	2	..	..	..	..	..	..	..
Psychoses with mental deficiency	12	10	22	..	..	..	2	..	2	1	3	4	1	4	5	1	..	1	2	..	2	1	1	3	1	4	..	..	..	..	..	..	..	1	1	2	..	2	..	..	..	..	..	..	..	..
Undiagnosed psychoses	6	2	8	..	..	..	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Without psychoses	147	23	170	1	2	3	3	1	4	15	1	16	24	3	27	24	2	26	23	2	25	17	6	23	18	3	21	8	2	10	6	1	7	6	..	6	2	..	2	..	..	..	..	..	..	..
Primary behavior disorders	1	4	5	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL	543	421	964	4	5	9	28	11	39	45	39	84	43	53	96	68	47	115	60	52	112	45	51	96	57	34	91	31	33	64	38	22	60	30	15	45	36	22	58	58	35	93	..	2	2	



AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
NEGRO RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over					
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T						
Psychoses with syphilitic meningo-encephalitis (general paresis)...	62	17	79	..	..	..	2	..	2	1	1	2	1	2	3	8	1	9	7	3	10	17	5	22	7	1	8	11	3	14	2	..	2	5	1	6	1	..	1	..	..				
Psychoses with other forms of syphilis of the central nervous system	2	..	2	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..					
Alcoholic psychoses .....	9	2	11	..	..	..	..	..	1	..	1	2	..	2	2	..	..	..	..	1	1	2	..	2	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..					
Traumatic psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	..	2	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..					
Psychoses with cerebral arteriosclerosis .....	64	49	113	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	..	2	..	7	6	13	6	9	15	11	8	19	8	12	20	19	6	25	11	3	14		
Psychoses with other disturbances of circulation .....	14	3	17	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	1	2	..	2	..	7	6	13	3	6	1	4	2	1	3	1	..	1	3	..	6	25	11	3	14
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	..	..	..	1	1	2	4	1	5	4	1	5	1	3	4	1	1	2	1	2	2	3	2	1	3	3	1	4	2	1	3	1	..	1	3	..	6	25	11	3	14	
Senile psychoses .....	12	9	21	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Involutional psychoses .....	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Psychoses associated with organic changes of the nervous system...	2	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Psychoneuroses .....	2	5	7	..	..	..	1	..	1	..	2	2	..	1	1	1	2	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Manic-depressive psychoses .....	24	38	62	1	..	1	1	..	1	5	6	3	6	9	3	6	9	4	7	11	7	2	9	2	7	9	1	3	4	..	1	1	2	..	2	..	..	..	..	..	..	..	..		
Dementia praecox (schizophrenia) .....	60	54	114	1	1	2	9	5	14	18	12	30	15	16	31	8	9	17	8	6	14	1	3	4	..	1	1	..	1	1	..	1	1	2	..	2	..	..	..	..	..	..	..	..	
Paranoia and paranoid conditions .....	..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses with psychopathic personality .....	1	..	1	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Psychoses with mental deficiency .....	10	10	20	2	1	3	1	..	1	2	5	8	1	2	3	2	..	2	..	1	1	..	..	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Without psychoses .....	57	16	73	7	5	12	10	11	4	3	7	6	3	9	5	1	6	1	2	3	2	1	3	1	..	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	
Total .....	312	220	532	11	7	18	26	12	38	34	30	64	34	31	65	32	24	56	28	18	46	28	22	50	21	19	40	20	16	36	18	10	28	16	14	30	24	8	32	20	9	29			

**DÉGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO  
PRINCIPAL PSYCHOSES**

**WHITE RACE**

PSYCHOSES	Total			Illiterate			Reads and Writes			Common School			High School			College			Unac- ertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo- encephalitis (general paresis) .....	31	10	41	2	..	2	3	..	3	17	8	25	6	2	8	3	..	3	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	..	..	..
Psychoses with epidemic encephalitis .....	..	3	3	..	..	..	..	..	..	..	3	3	..	..	..	..	..	..	..	..	..
Alcoholic psychoses .....	38	2	40	3	..	3	3	..	3	16	2	18	12	..	12	4	..	4	..	..	..
Psychoses due to drugs or other ex- ogenous poisons .....	9	4	13	..	..	..	..	..	..	2	4	6	6	..	6	1	..	1	..	..	..
Traumatic psychoses .....	4	..	4	1	..	1	..	..	..	2	..	2	..	..	..	1	..	1	..	..	..
Psychoses with cerebral arteriosclerosis .....	57	56	113	7	4	11	8	..	8	30	31	61	5	11	16	4	10	14	3	..	3
Psychoses with other disturbances of circulation .....	27	6	33	3	1	4	1	..	1	19	5	24	1	..	1	1	..	1	2	..	2
Psychoses with convulsive disorders (epilepsy) .....	14	12	26	3	1	4	1	..	1	8	6	14	1	3	4	..	1	1	1	1	2
Senile psychoses .....	25	20	45	3	2	5	1	..	1	12	10	22	2	7	9	3	1	4	4	..	4
Involuntary psychoses .....	17	55	72	2	1	3	2	..	2	9	31	40	1	17	18	3	6	9	..	..	..
Psychoses due to other metabolic, etc., diseases .....	3	5	8	..	1	1	..	..	..	2	2	2	1	3	1	1	2	..	..	..	..
Psychoses due to new growth .....	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	5	6	..	..	..	..	..	..	3	3	1	1	2	..	1	1	..	..	..	..
Psychoneuroses .....	41	88	129	..	..	..	6	2	8	21	48	69	9	26	35	4	12	16	1	..	1
Manic-depressive psychoses .....	50	34	84	2	..	2	6	..	6	27	19	46	11	10	21	4	5	9	..	..	..
Dementia praecox (schizophrenia) .....	50	71	121	1	..	1	7	1	8	21	32	53	16	30	46	4	8	12	1	..	1
Paranoia and paranoid conditions .....	6	9	15	..	..	..	1	..	1	2	3	5	2	4	6	1	2	3	..	..	..
Psychoses with psychopathic person- ality .....	3	..	3	..	..	..	..	..	..	1	..	1	1	..	1	1	..	1	..	..	..
Psychoses with mental deficiency .....	12	10	22	7	2	9	1	1	2	1	7	8	..	..	..	..	..	3	..	3	3
Undiagnosed psychoses .....	6	2	8	..	..	..	1	..	1	3	..	3	1	1	2	..	1	1	1	..	1
Without psychoses .....	147	23	170	5	4	9	18	..	18	63	6	69	42	10	52	18	3	21	1	..	1
Primary behavior disorders .....	1	4	5	..	..	..	1	..	1	..	4	4	..	..	..	..	..	..	..	..	..
<b>TOTAL .....</b>	<b>543</b>	<b>421</b>	<b>964</b>	<b>39</b>	<b>17</b>	<b>56</b>	<b>60</b>	<b>4</b>	<b>64</b>	<b>254</b>	<b>224</b>	<b>478</b>	<b>119</b>	<b>123</b>	<b>242</b>	<b>54</b>	<b>52</b>	<b>106</b>	<b>17</b>	<b>1</b>	<b>18</b>



DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO  
PRINCIPAL PSYCHOSES

NEGRO RACE

PSYCHOSES	Total			Illiterate			Reads and Writes			Common School			High School			College			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	62	17	79	18	3	21	3	3	6	37	9	46	2	1	3	2	1	3	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	2	..	2	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholic psychoses .....	9	2	11	1	..	1	1	..	1	5	2	7	1	..	1	1	..	1	..	..	..
Traumatic psychoses .....	1	..	1	..	..	..	..	..	1	1	1	1	..	..	..	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis .....	64	49	113	27	21	48	5	5	10	29	17	46	3	2	5	..	2	2	..	2	2
Psychoses with other disturbances of circulation .....	14	3	17	4	..	4	5	1	6	5	2	7	..	..	..	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	3	4	7	4	..	4	5	4	9	..	..	..	1	1	..	..	..	..
Senile psychoses .....	12	9	21	4	6	10	6	..	6	2	2	4	..	..	..	..	..	..	1	1	1
Involuntional psychoses .....	..	2	2	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	1	1	1	1	2	..	1	1	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	..	..	..	..	1	1	2	3	..	3	3	..	..	..	1	1	1
Psychoneuroses .....	2	5	7	..	3	5	3	3	6	12	24	36	2	7	9	2	..	2	3	1	4
Manic-depressive psychoses .....	24	38	62	2	3	5	3	3	6	32	36	68	8	9	17	..	..	5	..	..	5
Dementia praecox (schizophrenia) .....	60	54	114	12	6	18	3	3	6	32	36	68	8	9	17	..	..	..	..	..	..
Paranoia and paranoid conditions .....	..	2	2	..	..	..	..	..	..	2	2	..	..	..	..	..	..	..	..	..	..
Psychoses with psychopathic personality .....	1	..	1	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..
Psychoses with mental deficiency .....	10	10	20	7	3	10	..	2	2	2	4	6	1	..	1	..	1	1	..	..	..
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..
Without psychoses .....	37	16	53	16	8	24	2	2	4	16	5	21	3	1	4	..	..	..	..	..	..
TOTAL .....	312	220	532	95	56	151	35	20	55	148	111	259	21	23	44	5	5	10	8	5	13

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
WHITE RACE

PSYCHOSES	Total			Urban			Rural			Uncer- tained		
	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	31	10	41	16	8	24	15	2	17	..	..	..
Psychoses with other forms of syphilis of the central nervous system..	1	3	4	1	1	2	..	..	1	..	..	..
Psychoses with epidemic encephalitis .....	..	3	3	..	2	2	..	1	1	..	..	..
Alcoholic psychoses .....	38	2	40	16	2	18	22	..	22	..	..	..
Psychoses due to drugs or other exogenous poisons .....	9	4	13	3	3	6	6	1	7	..	..	..
Traumatic psychoses .....	4	..	4	1	..	1	3	..	3	..	..	..
Psychoses with cerebral arteriosclerosis .....	57	56	113	27	30	57	30	26	56	..	..	..
Psychoses with other disturbances of circulation .....	27	6	33	13	1	14	14	5	19	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	14	12	26	6	7	13	8	5	13	..	..	..
Senile psychoses .....	25	20	45	12	13	25	13	7	20	..	..	..
Involuntional psychoses .....	17	55	72	3	32	35	14	23	37	..	..	..
Psychoses due to other metabolic, etc., diseases .....	3	5	8	1	2	3	2	3	5	..	..	..
Psychoses due to new growth .....	..	1	1	..	..	..	1	1	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	5	6	..	2	2	..	3	3	..	..	..
Psychoneuroses .....	41	88	129	23	52	75	18	36	54	..	..	..
Manic-depressive psychoses .....	50	34	84	21	18	39	29	16	45	..	..	..
Dementia praecox (schizophrenia) .....	50	71	121	27	37	64	23	34	57	..	..	..
Paranoia and paranoid conditions .....	6	9	15	2	7	9	4	4	8	..	..	..
Psychoses with psychopathic personality .....	3	..	3	2	..	2	1	..	1	..	..	..
Psychoses with mental deficiency .....	12	10	22	2	5	7	10	5	15	..	..	..
Undiagnosed psychoses .....	6	2	8	2	..	2	3	2	5	1	..	1
Without psychoses .....	147	23	170	82	15	97	65	8	73	..	..	..
Primary behavior disorders .....	1	4	5	1	4	5	..	..	..	..	..	..
TOTAL .....	543	421	964	262	239	501	280	182	462	1	..	1

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
NEGRO RACE

PSYCHOSES	Total			Urban			Rural		
	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	62	17	79	42	10	52	20	7	27
Psychoses with other forms of syphilis of the central nervous system .....	2	..	2	1	..	1	1	..	1
Alcoholic psychoses .....	9	2	11	4	1	5	5	1	6
Traumatic psychoses .....	1	..	1	1	..	1	..	..	..
Psychoses with cerebral arteriosclerosis .....	64	49	113	28	25	53	36	24	60
Psychoses with other disturbances of circulation .....	14	3	17	8	2	10	6	1	7
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	6	7	13	6	2	8
Senile psychoses .....	12	9	21	8	4	12	4	5	9
Involuntional psychoses .....	..	2	2	..	2	2	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	2	2	1	1	2
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	1	1	..	..	..
Psychoneuroses .....	2	5	7	1	4	5	1	1	2
Manic-depressive psychoses .....	24	38	62	15	22	37	9	16	25
Dementia praecox (schizophrenia) .....	60	54	114	40	35	75	20	19	39
Paranoia and paranoid conditions .....	1	2	3	1	1	2	..	1	1
Psychoses with psychopathic personality .....	1	..	1	..	..	..	..	..	..
Psychoses with mental deficiency .....	10	10	20	7	6	13	3	4	7
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	..
Without psychoses .....	37	16	53	21	10	31	16	6	22
TOTAL .....	312	220	532	184	132	316	128	88	216



**ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE  
TO PRINCIPAL PSYCHOSES  
WHITE RACE**

PSYCHOSES	Total			Dependent			Marginal			Comfortable			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	31	10	41	..	1	1	30	9	39	1	..	1	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	1	1	2	..	1	1	1	..	1	..	..	..	..	..	..
Psychoses with epidemic encephalitis .....	..	3	3	..	..	..	..	3	3	..	..	..	..	..	..
Alcoholic psychoses .....	38	2	40	..	..	..	38	..	40	..	..	..	..	..	..
Psychoses due to drugs or other exogenous poisons .....	9	4	13	..	1	1	8	3	11	1	..	1	..	..	..
Traumatic psychoses .....	4	..	4	1	..	1	..	..	3	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis .....	57	56	113	3	5	8	54	50	104	1	1	..	..	..	..
Psychoses with other disturbances of circulation .....	27	6	33	2	..	2	25	6	31	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	14	12	26	..	3	3	14	8	22	1	1	..	..	..	..
Senile psychoses .....	25	20	45	4	3	7	21	17	38	..	..	..	..	..	..
Involuntional psychoses .....	17	55	72	..	..	..	17	53	70	2	2	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	3	5	8	..	..	..	3	5	8	..	..	..	..	..	..
Psychoses due to new growth .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	5	6	..	..	..	1	4	5	..	1	1	..	..	..
Psychoneuroses .....	41	88	129	6	5	11	35	76	111	7	7	..	..	..	..
Manic-depressive psychoses .....	50	34	84	3	1	4	45	32	77	2	1	3	..	..	..
Dementia praecox (schizophrenia) .....	50	71	121	3	5	8	46	62	108	..	4	4	1	..	1
Paranoia and paranoid conditions .....	6	9	15	..	1	1	6	6	12	2	2	..	..	..	..
Psychoses with psychopathic personality .....	3	..	3	..	..	..	3	..	3	..	..	..	..	..	..
Psychoses with mental deficiency .....	12	10	22	2	4	6	10	6	16	..	..	..	..	..	..
Undiagnosed psychoses .....	6	2	8	..	..	..	5	1	6	..	1	1	1	..	1
Without psychoses .....	147	23	170	11	2	13	134	19	153	2	2	4	..	..	..
Primary behavior disorders .....	1	4	5	1	1	2	..	3	3	..	..	..	..	..	..
<b>TOTAL</b> .....	543	421	964	36	33	69	499	366	865	6	22	28	2	..	2

**ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE  
TO PRINCIPAL PSYCHOSES  
NEGRO RACE**

PSYCHOSES	Total			Dependent			Marginal			Comfortable		
	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	62	17	79	..	..	..	62	17	79	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	2	..	2	..	..	..	..	..	2	..	..	..
Alcoholic psychoses .....	9	2	11	..	..	..	9	2	11	..	..	..
Traumatic psychoses .....	1	..	1	..	..	..	1	..	1	..	..	..
Psychoses with cerebral arteriosclerosis .....	64	49	113	1	..	1	62	47	109	1	2	3
Psychoses with other disturbances of circulation .....	14	3	17	1	..	1	13	3	16	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	1	..	1	11	9	20	..	..	..
Senile psychoses .....	12	9	21	1	..	1	10	9	19	1	..	1
Involuntional psychoses .....	..	2	2	..	..	..	..	2	2	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	..	..	1	3	4	..	..	..
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	..	..	..	1	1	..	..	..
Psychoneuroses .....	2	5	7	..	..	..	2	5	7	..	..	..
Manic-depressive psychoses .....	24	38	62	1	..	1	22	38	60	1	..	1
Dementia praecox (schizophrenia) .....	60	54	114	1	..	1	59	54	113	..	..	..
Paranoia and paranoid conditions .....	..	2	2	..	..	..	..	2	2	..	..	..
Psychoses with psychopathic personality .....	1	..	1	..	..	..	1	..	1	..	..	..
Psychoses with mental deficiency .....	10	10	20	..	..	..	10	10	20	..	..	..
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	1	..	..	..
Without psychoses .....	37	16	53	..	..	..	3	36	13	49	1	1
<b>TOTAL</b> .....	312	220	532	6	3	9	301	215	516	5	2	7

**USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
WHITE RACE**

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	31	10	41	18	10	28	9	..	9	4	..	4	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	1	1	2	1	1	2	..	..	..	..	..	..	..	..	..
Psychoses with epidemic encephalitis .....	38	28	40	..	3	3	..	..	..	38	..	40	..	..	..
Alcoholic psychoses .....	9	4	13	3	1	4	..	1	1	6	..	8	..	..	..
Psychoses due to drugs or other exogenous poisons .....	4	..	4	3	..	3	..	..	..	..	..	..	..	..	..
Traumatic psychoses .....	57	56	113	46	56	102	59	..	5	6	..	6	..	..	..
Psychoses with cerebral arteriosclerosis .....	27	6	33	21	5	26	..	1	3	4	..	4	..	..	..
Psychoses with other disturbances of circulation .....	14	12	26	13	12	25	11	..	1	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	25	20	45	22	19	41	..	1	4	..	..	..	..	..	..
Senile psychoses .....	17	55	72	10	54	64	..	..	5	2	..	2	..	1	1
Involuntary psychoses .....	3	5	8	1	5	6	..	..	2	..	..	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..
Psychoses due to new growth .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	5	6	..	4	4	..	..	1	..	1	..	1	1	1
Psychoneuroses .....	41	88	129	23	79	102	6	1	7	12	5	17	3	3	3
Manic-depressive psychoses .....	50	34	84	32	29	61	9	2	11	6	1	7	3	2	5
Dementia praecox (schizophrenia) .....	50	71	121	38	61	99	6	3	9	5	1	6	1	6	7
Paranoia and paranoid conditions .....	6	9	15	3	7	10	2	..	2	1	1	2	..	1	1
Psychoses with psychopathic personality .....	3	..	3	..	..	..	..	..	..	3	..	3	..	..	..
Psychoses with mental deficiency .....	12	10	22	10	9	19	..	1	1	2	..	2	..	..	..
Undiagnosed psychoses .....	6	9	15	3	1	4	..	3	3	1	1	2	..	..	..
Without psychoses .....	147	23	170	23	8	31	13	..	13	110	13	123	1	3	3
Primary behavior disorders .....	1	4	5	1	2	3	..	..	2	..	..	1	..	1	1
<b>TOTAL</b> .....	543	421	964	270	367	637	67	10	77	201	27	228	5	17	22

**USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
NEGRO RACE**

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	62	17	79	28	17	45	24	..	24	6	..	6	4	..	4
Psychoses with other forms of syphilis of the central nervous system .....	2	..	2	2	..	2	..	..	..	..	..	..	..	..	..
Alcoholic psychoses .....	9	2	11	..	..	..	..	..	..	9	2	11	..	..	..
Traumatic psychoses .....	1	..	1	..	..	..	..	..	1	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis .....	64	49	113	37	46	83	15	..	15	6	..	6	3	9	9
Psychoses with other disturbances of circulation .....	14	3	17	7	3	10	6	..	6	..	..	..	..	1	1
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	7	5	12	5	4	9	..	..	..	..	..	..
Senile psychoses .....	12	9	21	6	3	9	4	..	4	..	..	2	..	2	2
Involuntary psychoses .....	..	..	..	2	..	2	..	..	..	..	..	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	1	3	4	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..
Psychoneuroses .....	24	58	82	17	35	52	5	2	7	..	1	1	2	..	2
Manic-depressive psychoses .....	60	54	114	41	50	91	16	2	18	1	2	3	2	..	2
Dementia praecox (schizophrenia) .....	..	2	2	..	2	2	..	..	..	..	..	..	..	..	..
Paranoia and paranoid conditions .....	1	..	1	..	..	..	..	..	1	..	..	..	..	..	..
Psychoses with psychopathic personality .....	10	10	20	8	9	17	2	..	2	..	1	1	..	..	..
Psychoses with mental deficiency .....	1	..	1	..	..	..	..	..	1	..	..	..	..	..	..
Undiagnosed psychoses .....	37	16	53	26	14	40	8	..	8	1	2	3	2	..	2
Without psychoses .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
<b>TOTAL</b> .....	312	220	532	182	201	383	88	8	96	23	8	31	19	3	22



**MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE  
TO PRINCIPAL PSYCHOSES  
WHITE RACE**

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	M F T			M F T			M F T			M F T			M F T			M F T			M F T		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo- encephalitis (general paresis) .....	31	10	41	1	..	1	26	8	34	1	..	1	3	1	4	..	1	1	..	..	..
Psychoses with other forms of syphilis of the central nervous system .....	1	1	2	..	..	..	..	1	1	1	..	1	..	..	..	..	..	..	..	..	..
Psychoses with epidemic encephalitis	..	3	3	..	..	..	..	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholic psychoses .....	38	2	40	5	1	6	25	..	25	..	..	..	4	1	5	4	..	4	..	..	..
Psychoses due to drugs or other ex- ogenous poisons .....	9	4	13	1	..	1	5	4	9	..	..	..	..	..	..	3	..	3	..	..	..
Traumatic psychoses .....	4	..	4	3	..	3	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis	57	56	113	4	9	13	42	18	60	8	28	36	3	1	4	..	..	..	..	..	..
Psychoses with other disturbances of circulation .....	27	6	33	4	1	5	13	5	18	7	..	7	3	..	3	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	14	12	26	13	8	21	..	3	3	1	..	1	..	1	1	..	..	..	..	..	..
Senile psychoses .....	25	20	45	3	3	6	13	3	16	8	14	22	1	..	1	..	..	..	..	..	..
Involuntary psychoses .....	17	55	72	2	8	10	15	39	54	..	5	5	..	3	3	..	..	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	3	5	8	..	..	..	3	2	5	..	3	3	..	..	..	..	..	..	..	..	..
Psychoses due to new growth .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	5	6	..	2	2	..	2	2	..	1	1	1	..	1	..	..	..	..	..	..
Psychoneuroses .....	41	88	129	11	16	27	26	60	86	..	3	3	3	5	8	1	4	5	..	..	..
Manic-depressive psychoses .....	50	34	84	13	3	16	34	28	62	1	..	1	2	2	4	..	1	1	..	..	..
Dementia praecox (schizophrenia) .....	50	71	121	32	25	57	15	38	53	..	..	..	1	6	7	1	2	3	1	..	1
Paranoia and paranoid conditions .....	6	9	15	..	1	1	4	5	9	2	3	5	..	..	..	..	..	..	..	..	..
Psychoses with psychopathic person- ality .....	3	..	3	1	..	1	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses with mental deficiency .....	12	10	22	8	9	17	2	1	3	1	..	1	1	..	1	..	..	..	..	..	..
Undiagnosed psychoses .....	6	2	8	1	1	2	4	1	5	..	..	..	..	..	..	..	..	..	1	..	1
Without psychoses .....	147	23	170	39	6	45	76	10	86	5	3	8	19	1	20	8	3	11	..	..	..
Primary behavior disorders .....	1	4	5	1	1	2	..	3	3	..	..	..	..	..	..	..	..	..	..	..	..
<b>TOTAL .....</b>	<b>543</b>	<b>421</b>	<b>964</b>	<b>142</b>	<b>95</b>	<b>237</b>	<b>305</b>	<b>235</b>	<b>540</b>	<b>35</b>	<b>60</b>	<b>95</b>	<b>42</b>	<b>21</b>	<b>63</b>	<b>17</b>	<b>11</b>	<b>28</b>	<b>2</b>	<b>..</b>	<b>2</b>

**MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE  
TO PRINCIPAL PSYCHOSES  
NEGRO RACE**

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	M F T			M F T			M F T			M F T			M F T			M F T			M F T		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo- encephalitis (general paresis) .....	62	17	79	7	1	8	43	12	55	1	2	3	9	2	11	..	..	..	2	..	2
Psychoses with other forms of syphilis of the central nervous system .....	2	..	2	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..
Alcoholic psychoses .....	9	2	11	2	..	2	2	1	3	2	..	2	2	1	3	1	..	1	..	..	..
Traumatic psychoses .....	1	..	1	..	..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis	64	49	113	1	5	6	40	16	56	15	21	36	5	3	8	..	1	1	3	3	6
Psychoses with other disturbances of circulation .....	14	3	17	2	1	3	7	..	7	1	1	2	2	1	3	..	..	..	2	..	2
Psychoses with convulsive disorders (epilepsy) .....	12	9	21	6	5	11	4	2	6	..	1	1	1	1	2	..	..	..	1	..	1
Senile psychoses .....	12	9	21	2	1	3	7	2	9	1	6	7	1	..	1	..	..	..	1	..	1
Involuntary psychoses .....	..	2	2	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	2	2	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Psychoneuroses .....	2	5	7	1	1	2	1	4	5	..	..	..	..	..	..	..	..	..	..	..	..
Manic-depressive psychoses .....	24	38	62	10	13	23	12	20	32	..	4	4	..	1	1	..	..	..	2	..	2
Dementia praecox (schizophrenia) .....	60	54	114	35	22	57	21	20	41	1	2	3	3	10	13	..	..	..	..	..	..
Paranoia and paranoid conditions .....	..	2	2	..	..	..	..	1	1	..	..	1	..	..	..	..	..	..	..	..	..
Psychoses with psychopathic person- ality .....	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychoses with mental deficiency .....	10	10	20	9	7	16	..	2	2	..	..	..	1	1	2	..	..	..	..	..	..
Undiagnosed psychoses .....	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Without psychoses .....	37	16	53	25	13	38	10	..	10	1	1	2	1	2	3	..	..	..	..	..	..
<b>TOTAL .....</b>	<b>312</b>	<b>220</b>	<b>532</b>	<b>103</b>	<b>72</b>	<b>175</b>	<b>149</b>	<b>83</b>	<b>232</b>	<b>23</b>	<b>39</b>	<b>62</b>	<b>25</b>	<b>22</b>	<b>47</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>11</b>	<b>3</b>	<b>14</b>

## PSYCHOSES OF READMISSIONS

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	3	2	3	1	9
Psychoses with epidemic encephalitis .....	..	1	1	..	2
Alcoholic psychoses .....	9	..	..	..	9
Psychoses due to drugs or other exogenous poisons .....	..	1	..	..	4
Traumatic psychoses .....	3	..	..	..	3
Psychoses with cerebral arteriosclerosis .....	9	10	3	3	25
Psychoses with other disturbances of circulation .....	2	..	2	..	4
Psychoses with convulsive disorders (epilepsy) .....	7	6	4	1	18
Senile psychoses .....	1	1	1	1	4
Involucional psychoses .....	3	5	1	..	9
Psychoses due to other metabolic, etc., diseases .....	1	1	..	..	2
Psychoses associated with organic changes of the nervous system .....	1	1	..	..	2
Psychoneuroses .....	7	19	..	1	27
Manic-depressive psychoses .....	31	41	10	29	111
Dementia praecox (schizophrenia) .....	20	27	7	19	73
Simple .....	..	1	1	..	2
Catatonic .....	8	11	3	6	28
Hebephrenic .....	6	5	2	8	21
Paranoid .....	6	10	1	5	22
Paranoia and paranoid conditions .....	2	9	..	..	11
Psychoses with psychopathic personality .....	1	2	..	..	3
Psychoses with mental deficiency .....	4	7	1	..	12
Total with psychoses .....	107	133	33	55	328
Without Psychoses:					
Alcoholism .....	17	3	..	..	20
Convulsive disorders .....	..	..	1	..	1
Drug addiction .....	1	..	..	..	1
Mental deficiency .....	1	1	..	..	2
Primary behavior disorders:					
Simple adult maladjustment .....	1	1	..	..	2
Psychopathic personality .....	6	2	..	..	8
Without mental disorder .....	2	..	..	..	2
Total without psychoses .....	28	7	1	..	36
GRAND TOTAL .....	135	140	34	55	364



DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
AND CONDITION ON DISCHARGE

WHITE RACE

PSYCHOSES	Total			Recovered			Improved			Unimproved			Without Psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	14	6	20	..	..	..	14	5	19	..	1	1	..	..	..
Psychoses with epidemic encephalitis .....	3	5	8	..	..	..	2	2	4	1	3	4	..	..	..
Psychoses with other infectious diseases .....	1	1	2	..	1	1	1	1	1	..	..	..	..	..	..
Alcoholic psychoses .....	35	2	37	2	1	3	33	1	34	..	..	..	..	..	..
Psychoses due to drugs or other exogenous poisons .....	6	4	10	..	..	..	6	4	10	..	..	..	..	..	..
Traumatic psychoses .....	4	..	4	..	..	..	4	..	4	..	..	..	..	..	..
Psychoses with cerebral arteriosclerosis .....	29	39	68	..	..	..	23	37	60	6	2	8	..	..	..
Psychoses with other disturbances of circulation .....	7	9	16	..	..	..	7	9	16	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	5	14	19	..	..	..	4	13	17	1	1	2	..	..	..
Senile psychoses .....	6	5	11	..	..	..	6	4	10	..	1	1	..	..	..
Involuntional psychoses .....	16	24	40	..	..	..	15	22	37	1	2	3	..	..	..
Psychoses due to other metabolic, etc., diseases .....	1	3	4	..	..	..	1	2	3	..	1	1	..	..	..
Psychoses due to new growth .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	1	2	3	..	..	..	1	2	3	..	..	..	..	..	..
Psychoneuroses .....	33	73	106	..	..	..	33	71	104	..	2	2	..	..	..
Manic-depressive psychoses .....	53	69	122	..	..	..	48	69	117	5	..	5	..	..	..
Dementia praecox (schizophrenia) .....	29	75	104	..	..	..	26	68	94	3	7	10	..	..	..
Paranoia and paranoid conditions .....	5	15	20	..	..	..	2	11	13	3	4	7	..	..	..
Psychoses with psychopathic personality .....	4	2	6	..	..	..	4	2	6	..	..	..	..	..	..
Psychoses with mental deficiency .....	8	4	12	..	..	..	8	4	12	..	..	..	..	..	..
Undiagnosed psychoses .....	4	2	6	..	..	..	3	1	4	1	1	2	..	..	..
Total with psychoses .....	264	355	619	2	2	4	241	328	569	21	25	46	..	..	..
Without Psychoses:															
Alcoholism .....	104	14	118	..	..	..	..	..	..	..	..	..	104	14	118
Convulsive disorder .....	1	..	1	..	..	..	..	..	..	..	..	..	1	..	1
Drug addiction .....	7	3	10	..	..	..	..	..	..	..	..	..	7	3	10
Mental deficiency .....	6	4	10	..	..	..	..	..	..	..	..	..	6	4	10
Physical condition .....	3	3	6	..	..	..	..	..	..	..	..	..	3	3	6
Psychopathic personality .....	28	4	32	..	..	..	..	..	..	..	..	..	28	4	32
Simple adult maladjustment .....	1	5	6	..	..	..	..	..	..	..	..	..	1	5	6
Without mental disorder .....	26	3	29	..	..	..	..	..	..	..	..	..	26	3	29
Total without psychoses .....	176	36	212	..	..	..	..	..	..	..	..	..	176	36	212
GRAND TOTAL .....	440	391	831	2	2	4	241	328	569	21	25	46	176	36	212

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
AND CONDITION ON DISCHARGE

NEGRO RACE

PSYCHOSES	Total			Recovered			Improved			Unimproved			Without Psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	16	3	19	..	1	1	16	2	18	..	..	..	..	..	..
Alcoholic psychoses .....	12	..	12	..	..	..	11	..	11	1	..	1	..	..	..
Psychoses with cerebral arteriosclerosis .....	14	5	19	..	..	..	14	3	17	2	2	..	..	..	..
Psychoses with other disturbances of circulation .....	3	..	3	..	..	..	3	..	3	..	..	..	..	..	..
Psychoses with convulsive disorders (epilepsy) .....	3	4	7	..	..	..	3	4	7	..	..	..	..	..	..
Senile psychoses .....	1	1	2	..	..	..	1	1	2	..	..	..	..	..	..
Involuntional psychoses .....	..	3	3	..	..	..	..	2	2	..	1	1	..	..	..
Psychoses due to other metabolic, etc., diseases .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
Psychoses associated with organic changes of the nervous system .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
Psychoneuroses .....	..	1	1	..	..	..	..	..	..	1	1	..	..	..	..
Manic-depressive psychoses .....	38	58	96	..	6	6	37	50	87	1	2	3	..	..	..
Dementia praecox (schizophrenia) .....	28	38	66	..	..	..	25	32	57	3	6	9	..	..	..
Paranoia and paranoid conditions .....	1	3	4	..	..	..	1	3	4	..	..	..	..	..	..
Psychoses with mental deficiency .....	3	6	9	..	..	..	3	6	9	..	..	..	..	..	..
Total with psychoses .....	119	124	243	..	7	7	114	105	219	5	12	17	..	..	..
Without Psychoses:															
Alcoholism .....	2	2	4	..	..	..	..	..	..	..	..	2	2	4	..
Mental deficiency .....	3	6	9	..	..	..	..	..	..	..	..	3	6	9	..
Physical condition .....	1	..	1	..	..	..	..	..	..	..	..	1	..	1	..
Psychopathic personality .....	1	..	1	..	..	..	..	..	..	..	..	1	..	1	..
Without mental disorder .....	10	3	13	..	..	..	..	..	..	..	..	10	3	13	..
Total without psychoses .....	17	11	28	..	..	..	..	..	..	..	..	17	11	28	..
GRAND TOTAL .....	136	135	271	..	7	7	114	105	219	5	12	17	17	11	28



CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
WHITE RACE

CAUSES OF DEATH	Total			Senile			With cerebral arteriosclerosis			Syphilitic meningo-encephalitis			Alcoholic			Manic-depressive			Involuntional psychoses			Dementia praecox			Paranoia and paranoid conditions			Convulsive disorders (epilepsy)			Psychoneuroses			With mental deficiency			All other psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
Epidemic, Endemic and Infectious Diseases																																							
Pernicious anemia .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1		
Secondary anemia .....	..	4	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Peritonitis, perforated ulcer, stomach .....	1	..	1	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Tuberculosis of the respiratory system .....	3	5	8	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	1	4	5	..	..	..	..	..	..	..	..	..	..	..	2	2			
General Diseases not Included in Class I																																							
Cancer and other malignant tumors .....	3	5	8	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	1	..	..	..	3	1	4	..	..			
Diseases of the Nervous System																																							
Cerebral infection following prefrontal leukotomy .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	1	..	..			
Meningitis, pneumococci .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..			
Cerebral hemorrhage, apoplexy .....	..	8	8	..	1	1	..	4	4	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	1			
Epilepsy .....	4	1	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	1	4	..	..	..	..	..	..	..	..	1	1			
Exhaustion from mental excitement .....	2	6	8	..	..	..	..	1	1	..	..	1	1	..	..	..	..	1	3	4	..	..	..	..	..	..	..	..	..	..	1	1	..	1	1	..			
Syphilitic meningo encephalitis .....	11	2	13	..	..	..	..	..	11	2	13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Other diseases of the nervous system .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1			
Diseases of the Circulatory System																																							
Endocarditis and myocarditis .....	12	8	20	..	..	..	..	1	2	3	1	..	1	..	..	..	..	1	1	..	1	5	2	7	..	..	..	..	..	..	..	..	..	4	4	8			
Arteriosclerosis .....	65	31	96	14	8	22	32	14	46	..	..	..	..	..	1	..	1	..	1	1	3	5	8	..	..	2	..	2	..	..	2	..	2	11	3	14			
Cerebral thrombosis .....	1	2	3	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1			
Coronary thrombosis .....	7	10	17	1	1	2	1	2	3	..	..	..	..	..	1	1	1	1	2	2	1	3	..	..	1	1	2	..	1	1	..	..	1	2	3	..			
Diseases of the Respiratory System																																							
Bronchopneumonia .....	2	..	2	..	..	..	..	..	..	..	..	..	..	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1			
Lobar pneumonia .....	2	..	2	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Hypostatic pneumonia .....	2	..	2	..	1	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Acute pulmonary oedema .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Diarrhea and enteritis .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..			
Inanition .....	..	4	4	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	1	1	..	1	1	..	..	..	..	..	..	..	1	1	..	..	..	..			
Non-Venereal Diseases of Genito-Urinary System and Annexa																																							
Nephritis .....	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1			
Uremia .....	1	1	2	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1			
External Causes																																							
Suicide .....	1	2	3	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Overdose of drugs, at home .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..			
Accidental traumatism, fractured hip .....	..	5	5	..	..	3	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	1	..	..	..	..				
TOTAL .....	120	99	219	18	14	32	35	27	62	12	2	14	2	..	2	4	2	6	4	9	13	12	17	29	..	1	1	7	3	10	..	3	3	2	5	7	24	16	40

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
NEGRO RACE

CAUSES OF DEATH	Total			Senile			With cerebral arteriosclerosis			Syphilitic meningo-encephalitis			Alcoholic			Manic-depressive			Dementia praecox			Paranoia and paranoid conditions			Convulsive disorders (epilepsy)			With mental deficiency			All other psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
Epidemic, Endemic and Infectious Diseases	38	18	56	1	..	1	..	..	..	3	..	3	..	..	..	2	4	6	19	10	29	..	1	1	5	1	6	2	..	2	6	2	8
Tuberculosis of the respiratory system	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Syphilis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
General Diseases not Included in Class 1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	
Cancer and other malignant tumors	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	
Tumor (non-cancerous)	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	
Pellagra	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diabetes	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	
Diseases of the Nervous System	1	1	2	..	..	..	..	2	..	2	..	..	..	..	..	..	1	1	..	1	2	..	..	..	..	..	..	..	..	..	1	..	1
Meningitis (non-epidemic)	4	2	6	..	..	..	..	2	..	2	..	..	..	..	..	..	..	..	1	1	2	..	..	..	..	..	..	..	..	1	1	2	
Cerebral hemorrhage, apoplexy	36	9	45	..	..	..	..	..	..	36	9	45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Syphilitic meningo-encephalitis	13	10	23	..	..	..	..	..	..	1	..	1	..	1	2	5	7	5	2	7	..	..	..	..	1	1	1	..	1	3	2	5	
Exhaustion from mental excitement	9	1	10	..	..	..	..	..	..	1	..	1	..	..	..	..	..	2	2	..	..	..	..	6	..	6	..	..	..	1	1	2	
Epilepsy	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diseases of the Circulatory System	13	12	25	..	..	..	..	15	30	14	44	..	..	1	..	1	..	2	2	3	6	9	..	..	..	..	..	..	..	9	4	13	
Endocarditis and myocarditis	66	34	100	9	6	15	30	14	44	..	..	..	..	..	..	4	3	7	6	5	11	..	..	..	1	..	1	1	..	1	15	6	21
Arteriosclerosis	2	..	2	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	
Coronary thrombosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diseases of the Respiratory System	2	1	3	..	..	..	1	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	1	..	1	
Lobar pneumonia	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Pulmonary thrombosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diseases of the Digestive System	2	10	12	..	..	..	..	..	..	..	..	..	..	..	1	4	5	1	4	5	..	..	..	..	1	1	..	..	..	..	1	1	
Diarrhea and enteritis	..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	1	
Inanition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Non-Venereal Diseases of Genito-Urinary System and Annexa	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Nephritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Inanition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
External Causes	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	
Homicide	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Accidental traumatism prior to admission	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Stillborn	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
TOTAL	195	102	297	10	6	16	32	15	47	40	9	49	2	..	2	11	19	30	41	29	70	..	1	1	12	4	16	5	..	5	42	19	61



AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
WHITE RACE

PSYCHOSES	Total			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	12	2	14	1	..	..	..	..	2	..	2	..	..	1	..	1	..	1	1	4	..	4	3	1	4	1	..	1	..	..	..	1	..	1		
Alcoholic psychoses .....	2	..	2	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	1	..	1			
Psychoses due to drugs or other exogenous poisons .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..			
Traumatic psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..			
Psychoses with cerebral arteriosclerosis .....	35	27	62	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	..	1	3	3	4	2	6	14	7	21	16	14	30			
Psychoses with other disturbances of circulation .....	17	5	22	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	2	..	2	..	1	3	3	5	5	2	7	9	2	11	..			
Psychoses with convulsive disorders (epilepsy) .....	7	3	10	..	..	..	1	..	1	1	..	1	..	..	..	1	1	2	2	..	2	..	1	1	1	1	1	1	1	1	1	1	1			
Senile psychoses .....	18	14	32	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	1	2	3	1	3	4	..	1	1	1	1	1	16	14	30		
Involuntional psychoses .....	4	9	13	..	..	..	..	..	..	..	..	..	..	..	..	2	2	1	2	3	1	3	4	..	..	1	1	2	..	1	1	..	1	2		
Psychoses due to other metabolic, etc., diseases .....	1	6	7	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	1	1	2	..	..	1	1	..	..	..	..	..	3	3			
Psychoses due to new growth .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Psychoses associated with organic changes of the nervous system .....	1	2	3	..	..	..	..	..	..	..	..	..	1	1	..	1	1	..	1	1	..	..	..	1	..	1	..	1	..	..	..	..	3	3		
Psychoneuroses .....	..	2	3	..	..	..	..	..	..	..	..	..	1	1	1	1	1	..	..	1	1	..	..	..	1	..	1	..	1	..	1	1	1			
Manic-depressive psychoses .....	4	2	6	..	..	..	..	..	..	..	..	..	1	1	1	1	1	..	..	1	1	..	..	..	1	..	1	..	1	..	1	1	1			
Dementia praecox (schizophrenia) .....	12	17	29	..	..	..	3	3	..	1	1	1	1	1	2	..	..	1	1	1	3	4	2	1	3	3	2	5	1	1	2	3	5	8		
Paranoia and paranoid conditions .....	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	2	..	..	1	1	..	1	..	..	..	..	1	1		
Psychoses with mental deficiency .....	2	5	7	..	1	1	..	1	1	..	..	..	..	..	..	..	..	1	1	2	..	..	..	1	1	..	..	..	..	..	..	1	1	2		
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	..	..	..	1	1	..	..	..	..	..	1	1	1		
Without psychoses .....	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		
TOTAL .....	120	99	219	1	1	2	1	4	5	3	2	5	2	3	5	2	4	6	6	7	13	8	8	16	8	7	15	15	9	24	23	13	36	51	41	92

AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES  
NEGRO RACE

PSYCHOSES	Total		Under 15 years		15-19 years		20-24 years		25-29 years		30-34 years		35-39 years		40-44 years		45-49 years		50-54 years		55-59 years		60-64 years		65-69 years		70 years and over		Unascertained																
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T															
Psychoses with syphilitic meningo-encephalitis (general paresis) .....	40	9	49	..	..	..	..	2	..	2	..	1	1	3	..	3	3	3	6	10	3	13	7	1	8	5	1	6	1	..	1	5	..	5	3	..	3	1	..	1	..	..			
Psychoses with other forms of syphilis of the central nervous system .....	1	..	1	..	..	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..				
Alcoholic psychoses .....	2	..	2	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	1	1	1	..	..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..				
Psychoses with cerebral arteriosclerosis .....	32	15	47	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2				
Psychoses with other disturbances of circulation .....	17	4	21	..	..	..	..	..	..	..	1	1	1	..	..	1	..	..	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2				
Psychoses with convulsive disorders (epilepsy) .....	12	4	16	..	..	..	1	1	3	1	4	2	1	3	3	..	3	1	1	2	1	..	1	..	..	1	1	1	..	..	..	..	1	1	1	1	1	1	1	1	1	1			
Senile psychoses .....	10	6	16	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	..	..	..	2	1	3	..	2	2	2	2	2	2	2	2	2	2	2	2	2				
Psychoses due to other metabolic, etc., diseases .....	4	6	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	..	..	..	2	1	3	..	2	2	2	2	2	2	2	2	2	2	2	2	2				
Psychoses associated with organic changes of the nervous system .....	2	1	3	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..				
Manic-depressive psychoses .....	11	19	30	..	..	..	..	..	4	4	..	4	4	2	1	3	5	..	5	1	3	4	1	1	1	2	..	3	3	1	1	2	..	..	..	..	..	..	..	..	..				
Dementia praecox (schizophrenia) .....	41	29	70	..	..	1	..	1	7	5	12	6	4	10	6	3	9	8	2	10	3	5	8	2	3	5	..	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2			
Paranoia and paranoid conditions .....	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Psychoses with mental deficiency .....	5	..	5	..	..	..	..	2	..	2	..	..	2	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Undiagnosed psychoses .....	..	1	1	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Without psychoses .....	17	7	24	1	..	1	..	1	4	1	5	4	1	5	2	1	3	2	..	2	..	2	..	2	..	1	1	..	..	..	..	..	2	1	3	..	1	1	..	..	..	..			
TOTAL .....	195	102	297	1	..	1	2	2	4	18	11	29	13	13	26	20	5	25	19	6	25	21	11	32	16	7	23	15	9	24	14	11	25	18	10	28	16	8	24	21	9	30	1	..	1



TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL  
WHITE RACE

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T						
Psychoses with syphilitic meningo-encephalitis (general paresis)...	12	2	14	..	..	..	3	..	3	1	1	2	1	..	1	1	1	2	3	..	3	1	..	1	1	..	1	..	..	..	..	..	1	..	1	..	..	1	..	1		
Alcoholic psychoses .....	2	..	2	1	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Psychoses due to drugs or other exogenous poisons .....	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Traumatic psychoses .....	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Psychoses with cerebral arteriosclerosis .....	35	27	62	6	9	15	9	10	3	2	5	3	1	4	7	7	14	2	3	5	1	4	5	1	2	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..		
Psychoses with other disturbances of circulation .....	17	5	22	7	2	9	6	1	7	1	1	1	2	1	1	1	1	2	1	1	2	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Psychoses with convulsive disorders (epilepsy) .....	7	3	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Senile psychoses .....	18	14	32	1	2	3	6	3	9	1	4	5	3	1	4	5	1	6	2	..	..	..	..	..	..	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		
Involuntal psychoses .....	4	9	13	1	3	4	1	1	2	..	1	1	1	1	1	1	1	1	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	1	1	..	..	1			
Psychoses due to other metabolic, etc., diseases .....	1	6	7	1	..	2	2	..	1	1	..	..	1	1	1	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..			
Psychoses due to new growth .....	..	1	1	1	..	..	..	1	1	..	..	..	1	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Psychoses associated with organic changes of the nervous system...	1	2	3	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1			
Psychoneuroses .....	..	3	3	..	1	1	..	..	..	..	..	1	1	1	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..			
Manic-depressive psychoses .....	4	2	6	..	..	..	..	..	1	1	1	..	..	1	1	1	1	1	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	1	1	1	1	1	1			
Dementia praecox (schizophrenia) .....	12	17	29	..	..	..	2	2	1	..	1	..	..	1	1	2	..	..	..	..	1	2	3	1	2	3	1	1	1	1	1	1	1	1	1	1	1	1	1			
Paranoia and paranoid conditions .....	..	1	1	..	..	..	1	1	2	..	..	..	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	2	3	8	7			
Psychoses with mental deficiency .....	2	5	7	..	..	..	1	1	2	..	..	..	2	2	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	2	3			
Undiagnosed psychoses .....	1	..	1	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1			
Without psychoses .....	2	2	4	..	..	..	1	..	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	1	1	1			
TOTAL .....	120	99	219	16	19	35	28	11	39	7	8	15	8	8	16	20	12	32	8	5	13	4	7	11	7	3	10	2	4	6	2	1	3	2	6	8	1	4	5	15	11	26

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL  
NEGRO RACE

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over				
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T					
Psychoses with syphilitic meningo-encephalitis (general paresis) ...	40	9	49	7	1	8	12	2	14	8	3	11	...	...	...	8	1	9	2	1	3	1	1	2	...	...	...	1	...	1	...	...	1	...	1	...	...	...	...	...				
Psychoses with other forms of syphilis of the central nervous system	1	...	1	...	...	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Alcoholic psychoses	2	...	2	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Psychoses with cerebral arteriosclerosis	32	15	47	12	4	16	7	4	11	4	3	7	2	...	...	6	3	9	...	...	...	...	...	...	...	...	...	1	1	1	...	1	...	...	...	...	...	...	...	...				
Psychoses with other disturbances of circulation	17	4	21	6	...	6	5	2	7	1	...	1	1	1	1	1	...	...	...	...	...	...	...	...	...	...	...	2	1	1	1	1	1	...	...	...	...	...	...	...				
Psychoses with convulsive disorders (epilepsy)	12	4	16	1	...	1	...	1	1	...	1	1	...	...	...	3	2	2	2	2	2	2	2	4	...	...	...	1	1	1	1	1	...	1	...	1	2	...	2	...	...			
Senile psychoses	10	6	16	4	1	5	...	...	...	...	...	...	1	1	2	4	1	...	1	1	1	1	2	2	...	...	...	1	1	1	1	1	...	...	...	...	...	...	...	...				
Psychoses due to other metabolic, etc., diseases	4	6	10	...	...	...	...	2	2	...	...	...	...	...	...	2	1	3	2	1	...	...	...	...	...	...	...	1	1	1	1	1	...	...	...	...	...	...	...	...				
Psychoses associated with organic changes of the nervous system	2	1	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Manic-depressive psychoses	11	19	30	1	7	8	1	...	1	...	...	...	1	1	2	2	2	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
Dementia praecox (schizophrenia)	41	29	70	...	...	...	...	...	1	1	2	1	1	1	2	10	5	15	8	6	14	1	1	2	1	2	1	1	1	3	1	4	2	1	3	1	1	2	...	...	4	13	8	21
Paranoia and paranoid conditions	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Psychoses with mental deficiency	5	...	5	1	...	1	...	...	1	...	1	...	...	...	...	1	1	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Undiagnosed psychoses	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	...	...	...	...	...	...	...	...	...		
Without psychoses	17	7	24	3	...	3	...	...	1	...	1	...	...	...	...	2	...	2	1	1	2	3	2	5	2	2	1	3	1	1	2	...	...	...	...	...	...	...	...	...	...	4	2	6
TOTAL	195	102	297	36	13	49	26	12	38	16	8	24	5	4	9	39	15	54	17	10	27	9	8	17	4	5	9	10	4	14	6	2	8	3	1	4	7	8	15	17	12	29		



## AGE AND DURATION OF HOSPITAL LIFE OF PATIENT DYING OF PELLAGRA

Negro Woman	Duration in Hospital	Age	Psychosis
1	6 yrs. 11 mos. 3 dys.	33	Without psychosis, mental deficiency.

## RESULT OF PELLAGRIN ADMITTED DURING YEAR

	Negro Woman
Still in hospital .....	1
Total .....	1

## OCCUPATIONS AND DAILY AVERAGE NUMBER OF PATIENTS OCCUPIED

	White Men	White Women	Negro Men	Negro Women	Total
Baggage room .....	2	5	..	..	7
Bakery .....	21	..	..	..	21
Barber shop .....	2	2	..	..	5
Carbolizing detail .....	..	..	6	..	6
Cleaning offices and halls .....	16	..	..	..	16
Coal pile and detail .....	25	..	10	..	35
Dairy .....	9	..	10	..	19
Dental office .....	1	..	..	..	1
Diet kitchen .....	..	4	..	..	4
Dining room .....	110	104	60	69	343
Fancy work .....	..	23	..	..	23
Farm .....	46	..	100	..	146
Firemen .....	..	..	4	..	4
Fish detail .....	15	..	..	..	15
Florist .....	6	..	2	..	8
Garbage .....	6	..	1	..	7
Garden, vegetable .....	6	..	12	..	18
Herdsmen .....	..	..	2	..	2
Kitchen .....	32	..	50	22	104
Laboratory .....	1	..	..	..	1
Laundry .....	1	..	15	11	27
Library .....	..	2	..	..	2
Mattress making .....	9	..	..	..	9
Musicians .....	7	..	..	..	7
Offices .....	..	2	..	..	2
Printers .....	2	..	..	..	2
Scrubbers .....	..	..	40	50	90
Sewer Cleaners .....	4	..	4	..	8
Sewing room .....	..	81	..	32	113
Stairways .....	12	..	..	..	12
Storeroom .....	14	..	..	..	14
Trucks and wagons .....	..	..	9	..	9
Vegetable house .....	..	45	..	18	63
Ward work .....	320	206	255	221	1,002
Wood yard and cutting .....	..	..	8	..	8
Yard detail .....	12	6	10	3	31
TOTAL .....	679	480	599	426	2,184

## RESIDENCE OF PATIENTS PRESENT JUNE 30, 1948

COUNTIES	White Men	Negro Men	White Women	Negro Women	Total
Abbeville .....	11	18	17	12	58
Aiken .....	44	33	37	27	141
Allendale .....	16	19	12	13	60
Anderson .....	75	34	95	30	234
Bamberg .....	5	11	4	19	39
Barnwell .....	17	24	10	22	73
Beaufort .....	7	20	4	20	51
Berkeley .....	9	22	12	22	65
Calhoun .....	7	18	12	11	48
Charleston .....	83	114	98	98	393
Cherokee .....	25	16	31	14	86
Chester .....	21	20	27	27	95
Chesterfield .....	38	18	25	14	95
Clarendon .....	12	23	19	33	87
Colleton .....	26	21	30	18	95
Darlington .....	31	22	32	25	110
Dillon .....	7	7	20	14	48
Dorchester .....	9	17	10	16	52
Edgefield .....	11	19	9	14	53
Fairfield .....	19	17	14	25	75
Florence .....	26	50	39	36	151
Georgetown .....	8	24	11	20	63
Greenville .....	110	42	129	40	321
Greenwood .....	26	27	28	22	103
Hampton .....	11	9	11	14	45
Horry .....	16	22	29	10	77
Jasper .....	4	12	2	7	25
Kershaw .....	24	24	24	26	98
Lancaster .....	22	17	31	14	84
Laurens .....	52	29	29	23	133
Lee .....	17	9	18	18	62
Lexington .....	30	10	48	3	91
Marion .....	11	16	23	22	72
Marlboro .....	14	20	17	19	70
McCormick .....	4	6	6	8	24
Newberry .....	18	16	20	13	67
Oconee .....	28	14	30	6	78
Orangeburg .....	24	59	50	60	193
Pickens .....	45	4	34	8	91
Richland .....	100	83	106	101	390
Saluda .....	12	7	11	7	37
Spartanburg .....	98	56	128	51	333
Sumter .....	19	46	30	45	140
Union .....	21	14	27	19	81
Williamsburg .....	11	46	12	31	100
York .....	45	35	46	37	163
TOTAL .....	1,269	1,190	1,457	1,134	5,050



## RESIDENCE OF PATIENTS RECEIVED JULY 1, 1947-JUNE 30, 1948

COUNTIES	White Men	Negro Men	White Women	Negro Women	Total
Abbeville	11	4	6	5	26
Aiken	23	9	14	5	51
Allendale	2	6	5	5	18
Anderson	36	13	29	9	87
Bamberg	4	1	3	..	8
Barnwell	7	4	3	3	21
Beaufort	3	6	1	6	16
Berkeley	3	4	1	4	19
Calhoun	2	4	2	8	12
Charleston	43	30	34	17	124
Cherokee	15	2	2	2	27
Chester	21	3	12	6	42
Chesterfield	16	5	10	3	34
Clarendon	4	10	6	9	29
Colleton	10	5	8	6	29
Darlington	7	5	13	5	30
Dillon	4	7	5	4	20
Dorchester	8	1	7	3	19
Edgefield	5	9	2	1	17
Fairfield	11	5	6	7	29
Florence	22	12	17	6	57
Georgetown	6	7	5	2	20
Greenville	64	7	54	18	143
Greenwood	21	6	10	6	43
Hampton	7	4	3	4	18
Horry	11	5	12	1	29
Jasper	4	4	1	2	11
Kershaw	10	4	14	5	33
Lancaster	20	5	11	4	40
Laurens	27	14	16	4	61
Lee	8	4	7	4	23
Lexington	26	4	17	4	51
Marion	3	2	10	7	22
Marlboro	11	6	10	3	30
McCormick	..	2	2	1	5
Newberry	15	12	9	8	44
Oconee	6	3	12	3	24
Orangeburg	17	20	20	11	68
Pickens	9	3	20	2	34
Richland	54	34	28	24	140
Saluda	2	3	6	1	12
Spartanburg	48	19	57	12	136
Sumter	9	11	13	14	47
Union	11	3	8	5	27
Williamsburg	3	13	4	8	28
York	24	6	18	8	56
TOTAL	678	346	561	275	1,860





**South Carolina State Hospital**  
**TREASURER'S REPORT**

June 30, 1948

Coyt Ham, M.D., Superintendent  
 South Carolina State Hospital  
 Columbia, S. C.

Dear Sir:

I am attaching the financial report for the year July 1, 1947-June 30, 1948:

**INCOME**

Appropriation .....\$2,430,171.71

**COST OF OPERATION**

The net expenditure for maintenance is \$2,430,171.71. The daily average population is 4,980 and the daily per capita cost \$1.3333.

The dairies and farms show an overall profit of \$43,688.25.

Yours very truly

T. F. STEVENSON, SR.  
 Treasurer

## FINANCIAL STATEMENT FOR THE YEAR ENDED JUNE 30, 1948

### MAINTENANCE

#### Receipts

Appropriation State of South Carolina .....	\$ 2,413,000.00
Transfer—Mental Hygiene .....	17,171.71
	\$ 2,430,171.71

#### Disbursements

Salaries and Wages .....	\$ 883,494.79
Repairs .....	66,391.54
Water, Light, Heat and Power .....	57,343.79
Food (Includes Farm and Dairy Expense) .....	956,294.42
Fuel .....	96,242.82
Clothing and Dry Goods .....	213,800.03
Insurance .....	9,790.03
Equipment .....	51,400.90
All Other Expenditures .....	95,413.39
	\$ 2,430,171.71

### INCOME STATE TREASURER

#### Collections:

Pay Patients .....	\$ 33,045.60
Rental of Quarters .....	9,480.00
Subsistence .....	14,131.98
Miscellaneous .....	19,497.10
Occupational Department .....	657.00
	\$ 76,811.68
Remittance to State Treasurer .....	\$ 76,811.68

Received from Sinking Fund Commission Fire

Damage to Potato House .....	\$ 1,358.35
Balance on hand (Deposited with State Treasurer)\$	1,358.35



**MENTAL HYGIENE****Receipts**

Received from State Appropriation .....	\$ 28,354.00
Received from Federal Grant .....	33,980.00
Refund .....	2.54
	<hr/>
	\$ 62,336.54

**Disbursements**

Expended from State Funds .....	\$11,183.14
Expended from Federal Funds .....	22,366.27
	<hr/>
Total Expenditures .....	\$ 33,549.41
Transferred from State Funds to Maintenance Account .....	17,171.71
Balance on hand (Deposited with State Treasurer)	
Federal Funds .....	11,615.42
	<hr/>
	\$ 62,336.54

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**STRUCTURAL AND NON-STRUCTURAL IMPROVEMENTS  
AND EQUIPMENT**

Appropriated 1946 Session of Legislature .....	\$ 1,000,000.00
Expenditures .....	7,609.27

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Balance on hand (Deposited with State Treasurer) \$ 992,390.73

Statement of Building Fund from sale of \$550,000.00 of Certificates of Indebtedness of the State of South Carolina for the South Carolina State Hospital and State Training School, January 1, 1942:

Proceeds, sale of bonds .....	\$550,000.00
Premium .....	880.00
Accrued Interest .....	275.00
	<hr/>
	\$ 551,155.00
Allotted to State Training School .....	119,193.92
	<hr/>
	\$ 431,961.08

Already expended and reported in  
previous annual reports:

1941-42 .....	\$ 498.65
1942-43 .....	415,785.25
1943-44 .....	11,624.54
1944-45 .....	955.43
1945-46 .....	2,452.19
1946-47 .....	0.00
	<hr/>
	\$ 431,316.06
	<hr/>
	645.02
Expended in 1947-48 .....	645.02
	<hr/>
BALANCE .....	\$ 0.00

### GENERAL INFORMATION

July 1, 1947 - June 30, 1948

1. Date of opening as a hospital for mental diseases:  
December 18, 1827.
2. Type of hospital: State
3. Value of Hospital property:

Real estate (including buildings) .....	\$ 4,337,756.97
Personal property .....	574,915.34
	<hr/>
Total .....	\$ 4,912,672.31

Total acreage of hospital property owned (in- cluding farms, grounds, gardens and sites oc- cupied by buildings) .....	2721.05
Additional acreage rented (woods for shade).....	3.
Total acreage under cultivation during year, in- cluding 208.96 acres in annual and permanent pastures .....	1118.55



## OFFICERS AND EMPLOYEES

June 30, 1948

	White		Negro		Total	Vacancies		
	M	W	M	W		M	W	Total
Superintendent .....	1	---	---	---	1	---	---	---
Clinical Director .....	1	---	---	---	1	---	---	---
Director of Research .....	1	---	---	---	1	---	---	---
Assistant Physicians .....	10	---	---	---	10	8	1	9
Pathologist .....	1	---	---	---	1	---	---	---
Total Physicians .....	14	---	---	---	14	---	---	---
Attendants .....	86	67	66	103	322	24	33	57
Business Manager .....	1	---	---	---	1	---	---	---
Chaplain .....	1	---	---	---	1	---	---	---
Dentist .....	1	---	---	---	1	---	---	---
Dietitian .....	---	1	---	---	1	---	---	---
Lab. and X-Ray Technicians .....	3	1	---	---	4	---	---	---
Librarian .....	---	1	---	---	1	---	---	---
Matrons and Asst. Matrons .....	---	2	---	---	2	---	---	---
Nurses:								
Graduate .....	---	12	---	3	15	---	104	104
Student .....	---	9	---	---	9	---	41	41
Occupational Instructors .....	---	5	---	---	5	---	---	---
Office Personnel .....	---	25	---	---	25	---	---	---
Other Employees not listed (incl. 9 musicians) .....	97	35	116	65	313	---	---	---
Parasitologist .....	1	---	---	---	1	---	---	---
Personnel Officer .....	1	---	---	---	1	---	---	---
Pharmacist .....	1	---	---	---	1	---	---	---
Social Workers .....	---	1	---	---	1	---	1	1
Supervisors & Asst. Super- visors .....	8	10	---	---	18	---	---	---
Treasurer .....	1	---	---	---	1	---	---	---
Total Officers & Employees	215	169	182	171	737	---	---	---

	White		Negro		Total
	M	W	M	W	
5. Patients employed in industrial classes or in general hospital work on date of report .....	679	480	599	426	2184
6. Average daily number of all patients in hospital during the year .....	1261	1435	1188	1096	4980
7. Patients admitted voluntarily during the year .....	59	46	2	4	111

## COLUMBIA DAIRY REPORT 1947-48

## Debits

Inventory—July 1, 1947 .....	
Dairy and farm implements .....	\$ 5,332.09
Feed .....	9,356.00
Fertilizer .....	362.13
Pure bred cattle .....	54,215.00
Work animals (8) .....	1,465.00
Agricultural and botanical supplies .....	1,248.40
Bedding .....	972.00
Board of attendants and laborers .....	2,838.60
Depreciation of Plant .....	700.00
Equipment .....	191.19
Ensilage (uncut) 1,431 tons @ 10.00 .....	14,310.00
Feed .....	39,537.34
Freight and express .....	2,061.16
Hauling .....	1,147.50
Hay .....	19,248.24
Insurance on buildings .....	187.78
Interest on amount invested in cattle .....	600.00
Kerosene, gasoline, and oil .....	290.36
Labor by Columbia Farm .....	307.23
Labor—Moore Farm tending to dairy's cows .....	823.50
Lights and water .....	300.00
Material for repairs to equipment .....	505.40
Miscellaneous supplies .....	884.69
Pasturage (Moore Farm) .....	1,250.00
Pay Roll .....	23,858.35
Registration fees .....	255.50
Rent of land—42.26 acres @ 4.00, building 420.00.....	589.04
Seed and plants .....	848.10
Slaughtering cows .....	49.00
Straw, pine: 45 tons @ 10.00 .....	450.00
Subscription to magazines .....	14.50
Testing cows for advanced registry .....	840.57
Veterinarian and veterinary supplies .....	324.75
Balance in favor of Columbia Dairy .....	5,354.82
<hr/>	
\$190,718.24	



**COLUMBIA DAIRY REPORT 1947-48****Credits**

Animals sold .....	\$ 4,346.97
Animal caught in field .....	1.00
Bags (empty) .....	204.15
Beef: 23,100 pounds @ .24 and .34 .....	6,576.54
Compost .....	1,381.70
Equipment, farm, transferred to other farms .....	1,048.25
Feed sold .....	479.80
Fertilizer, 2.9 tons @ 49.75 .....	144.27
Hauling .....	48.00
Hay: 23.5 tons @ 30.00 and 35.00 .....	418.00
Hides and tallow .....	644.84
Milk: 198,096 @ .53 .....	104,990.88
Miscellaneous supplies .....	13.80
Plants and seed .....	32.00
Registration fees .....	24.00
Refunds received .....	.50
Service fees .....	1,538.00
Work animals (6) transferred to Columbia Farm .....	1,225.00

**Inventory—June 30, 1948**

Dairy and farm implements .....	3,543.51
Feed .....	7,914.24
Fertilizer .....	767.79
Pure bred cattle (Holstein) .....	43,625.00
Pure bred cattle (Guernsey) .....	11,550.00
Work animals (2) .....	200.00

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\$190,718.24

**COLUMBIA FARM REPORT 1947-48****Debits****Inventory—July 1, 1947**

Feed and seed .....	\$ 3,545.89
Fertilizer .....	246.85
Hogs .....	7,224.00
Implements and machinery .....	2,389.90
Work animals (10) .....	1,835.00

Animals bought .....	427.50
Agricultural and botanical supplies .....	1,927.82
Bedding .....	215.00
Board of attendants and laborers .....	720.00
Depreciation of plant .....	500.00
Drugs .....	2.92
Ensilage, uncut, 303 tons @ 8.00 .....	2,424.00
Equipment .....	4,174.93
Feed .....	21,615.22
Freight and express .....	1,041.88
Garbage .....	2,923.42
Hauling .....	712.00
Insurance on buildings .....	156.91
Kerosene, gasoline, and oil .....	386.95
Lights and water .....	120.00
Material for repairs to equipment .....	293.21
Miscellaneous supplies .....	155.55
Pay Roll .....	14,587.98
Rent of land—187.71 acres @ 4.00—cabins and dwell- ings (4) @ 600.00 .....	1,350.84
Plants and seed .....	1,325.64
Plowing .....	28.50
Slaughtering .....	981.50
Veterinarian and veterinary supplies .....	490.66
Work animals (6) transferred from Columbia Dairy .....	1,225.00
Loss showed by Columbia Farm .....	3,330.80
	<hr/>
	\$ 71,363.67

## COLUMBIA FARM REPORT 1947-48

### Credits

Bags .....	\$ 216.25
String Beans: 60.43 bushels @ 1.25 .....	75.55
Beets: 50 bushels @ 1.00 .....	50.00
Cabbage: 39,539 pounds @ .03 .....	1,186.17
Collards: 6,304 pounds @ .03 .....	189.12
Compost .....	128.25
Corn—roasting ears: 486.3 doz. @ .20 .....	97.26
Ensilage: 802 tons @ 10.00 .....	8,020.00



Feed sold .....	303.00
Fertilizer .....	23.26
Hay: 121.30 @ 25.00, 27.50, 30.00 .....	3,257.78
Iron, scrap: 1000 pounds @ 1.00 cwt. ....	10.00
Labor to Columbia Dairy .....	326.73
Okra: 560.38 bushels @ 1.00 .....	560.38
Onions: 404.54 @ .90 .....	364.08
Plants and seed .....	120.96
Pork: 108,702 pounds @ .30 .....	32,610.60
Rutabagas: 144.83 bushels @ 1.10 .....	159.32
Salad: 420 pounds @ .02 .....	8.40
Shucks .....	35.00
Squash: 423.04 bushels @ 1.05 .....	444.23
Tractor plowing: 22 hours @ 1.25 and 1.50 .....	29.25
Turnips: 513.13 bushels @ .40 .....	205.25
Work animals sold (10) .....	1,605.00
Inventory—June 30, 1948	
Feed and seed .....	4,395.48
Fertilizer .....	1,058.82
Hogs .....	7,470.00
Implements and machinery .....	6,663.53
Work animals .....	1,750.00
	<hr/>
	\$ 71,363.67

## MOORE FARM REPORT 1947-48

### Debits

Inventory—July 1, 1947	
Feed and seed .....	\$ 1,770.00
Fertilizer .....	891.00
Implements and machinery .....	6,779.42
Work animals (7) .....	1,230.00
Agricultural and botanical supplies .....	5,021.23
Board of attendants .....	360.00
Compost .....	1,192.14
Depreciation of Plant .....	250.00
Equipment .....	936.54
Freight and express .....	17.42
Gasoline .....	682.84

Hauling .....	2,323.00
Insurance on buildings .....	117.56
Lights and water .....	60.00
Material for repairs to equipment .....	463.35
Miscellaneous supplies .....	235.96
Pay roll .....	8,553.60
Plants and seed .....	1,182.02
Tractor fuel .....	654.17
Rent of land: 444 acres @ 3.00—7 cabins @ 36.00—1 cottage @ 180.00—1 cottage @ 96.00 .....	1,860.00
Balance in favor of Moore Farm .....	19,332.68
	<hr/>
	\$ 53,912.93

## MOORE FARM REPORT 1947-48

### Credits

Butter beans: 64 bushels @ 2.40 .....	\$ 153.60
Bedding .....	860.00
Beets: 15 bushels @ 1.00 .....	15.00
Cabbage: 25,260 pounds @ .03 .....	757.80
Cane for silage: 208 tons @ 7.00 (uncut) .....	1,456.00
Cantaloupes: 705 dozen @ .40 .....	282.00
Collards: 14,620 pounds @ .03 .....	438.60
Cucumbers: 23 bushels @ .60, 40 bushels @ .75 .....	43.80
Corn, roasting ears: 90 dozen @ .20 .....	18.00
Corn for silage: 1436 tons @ 9.00 (uncut) .....	12,924.00
Corn, shelled: 1153.4 bushels @ 2.00 .....	2,306.80
Corn, in shuck: 695 bushels @ 1.75 .....	1,216.25
Equipment transferred to other farms .....	290.00
Hauling .....	8.00
Hay: 155.41 tons @ 27.50 .....	4,273.77
Labor .....	823.50
Mowing .....	93.00
Oat silage: 90 tons @ 6.00 (uncut) .....	540.00
Okra: 373 bushels @ 1.00 .....	373.00
Onions: 248 bushels @ 1.00 .....	248.00
Pasture .....	1,290.00
Peas: 4970 pounds @ .05 .....	248.50
Plants and seed .....	30.00
Plowing: 594 hours @ 1.20 and 1.50 .....	867.90



Potatoes, sweet: 1995 @ 1.75 .....	3,491.25
Rutabagas: 1930 bushels @ 1.10 .....	2,123.00
Saw-Milling .....	2,065.96
Shucks .....	80.00
Salad: 4269 bushels @ .24 .....	1,024.75
Squash: 326 bushels @ 1.50 .....	489.00
Straw, pine: 66 tons @ 10.00 .....	660.00
Tomatoes: 233 bushels @ 2.40 .....	559.20
Turnips: 656 bushels @ .40 .....	262.40
Watermelons: 4975 @ .10 .....	497.50

## Inventory—June 30, 1948

Feed and seed .....	2,950.00
Fertilizer .....	973.10
Implements and machinery .....	8,489.25
Work animals (4) .....	690.00

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\$ 53,912.93

**PIL FARM REPORT 1947-48****Debits**

## Inventory—July 1, 1947

Feed and seed .....	\$ 2,330.00
Fertilizer .....	698.70
Implements and machinery .....	2,072.00
Work animals (25) .....	5,420.00
Agricultural and botanical supplies .....	7,015.31
Bedding .....	613.34
Board of attendants .....	320.04
Compost .....	29.25
Depreciation of Plant .....	100.00
Equipment .....	2,719.67
Freight and express .....	104.21
Gasoline, kerosene, and oil .....	704.29
Hauling .....	8.00
Insurance on buildings .....	88.52
Lights and water .....	84.00
Material for repairs to equipment .....	502.26
Miscellaneous supplies .....	845.33
Pay roll .....	7,994.93

Plowing, Tractor .....	858.15
Rent of land, 350 acres @ 2.00 and cottage, 432.00.....	1,132.00
Seed and plants .....	2,462.67
Slabs, wood .....	20.00
Veterinarian and veterinary supplies .....	49.50
Balance in favor of Pil Farm .....	8,116.37
	<hr/>
	\$ 44,288.54

### PIL FARM REPORT 1947-48

#### Credits

Corn, shelled: 1100 bushels @ 2.00 .....	\$ 2,200.00
Cantaloupes; 2251 dozen @ .40 .....	900.40
Ensilage: 1547 tons @ 10.00 .....	15,470.00
Feed sold .....	206.20
Grazing to Pil Dairy .....	4,928.00
Hauling .....	600.00
Hay: 19,525 tons @ 27.50 .....	536.94
Potatoes, Irish: 1300 bushels @ 1.00 .....	1,300.00
Potatoes, sweet: 3450 bushels @ 1.75 .....	6,037.50
Watermelons: 13,250 @ .10 .....	1,325.00
Inventory—June 30, 1948	
Feed and seed .....	2,262.50
Implements and machinery .....	5,062.00
Work animals (17) .....	3,460.00
	<hr/>
	\$ 44,288.54

### PIL DAIRY REPORT 1947-48

#### Debits

Inventory—July 1, 1947	
Feed .....	\$ 4,302.49
Pure Bred Cattle .....	17,481.55
Grade Cattle .....	18,150.32
Hogs .....	1,383.75
Implements and machinery .....	1,040.00
Agricultural and botanical supplies .....	573.59
Board of attendants and workers .....	2,100.00
Corn, shelled, 89.3 bushels @ 2.00 .....	178.60



Depreciation of plant .....	81.60
Ensilage: 1547 tons @ 10.00 .....	15,470.00
Equipment .....	416.95
Feed .....	36,832.35
Freight and express .....	2,231.40
Grazing .....	4,928.00
Hauling .....	94.50
Hay .....	16,599.99
Insurance on buildings .....	179.72
Kerosene, gasoline and oil .....	49.63
Lights and water @ 25.00 per month .....	300.00
Materials for repairs to equipment .....	536.92
Miscellaneous supplies .....	940.73
Mowing .....	60.00
Pasture .....	40.00
Pay roll .....	17,342.82
Plants and seed .....	56.20
Registration fees .....	37.50
Service fees .....	622.00
Slaughtering of cows .....	141.50
Testing of herds .....	369.78
Veterinarian and veterinary supplies .....	435.90
Balance in favor of Pil Dairy .....	9,218.98
	<hr/>
	\$152,196.77

## PIL DAIRY REPORT 1947-48

### Credits

Animals sold .....	\$ 1,025.61
Bags (empty) .....	6.00
Beef: 24,904 pounds @ .15, .17, and .24 .....	5,435.61
Hides .....	442.08
Milk: 177,527½ gallons @ .53 .....	94,089.58
Pork: dressed, 17,968 pounds @ .28 .....	5,031.04
Inventory—June 30, 1948	
Feed .....	6,115.85
Pure bred cattle .....	18,125.00
Grade cattle .....	20,365.00
Implements and machinery .....	1,561.00
	<hr/>
	\$152,196.77





**Progress Report**  
**WILLIAMS MALARIA LABORATORY**  
**For the year ending June 30, 1948**

Dr. Coyt Ham, Superintendent  
South Carolina State Hospital  
Columbia, South Carolina

Dear Doctor Ham:

I have the honor to submit the annual report for the year ending June 30, 1948, of the investigations conducted by the Malaria Research Laboratory of the U. S. Public Health Service in cooperation with the South Carolina State Hospital.

Our work continues along the following lines: to find improved methods of treating neurosyphilis with malaria alone or in combination with drugs such as penicillin; to aid in the treatment of neurosyphilis over the United States by furnishing established strains of malaria and information pertaining to its use; to find better methods of treating malaria by the use of new drugs; to advance knowledge of malaria by investigating its manifestations both in man and in the mosquito; to disseminate knowledge about malaria and its use in therapy by lectures to medical, scientific, and other educational organizations; and to assist in medical and scientific research by demonstrating to students and visitors, both native and foreign, our laboratory and research methods.

### RESEARCH

It was found that certain foreign and domestic strains of *Plasmodium vivax* produce forms, especially segmenters, which resemble *P. ovale*. These forms occur at irregular intervals. It is concluded that the diagnosis of a species as *P. ovale* should not be based upon only a few preparations since these *ovale*-like forms appear at varying intervals and may be followed by typical *P. vivax* segmenters.

Exotic strains of *P. vivax* appear to be similar in their ability to infect any one species of *Anopheles* mosquito. However, different species of *Anopheles* vary in their susceptibility to any one strain of *P. vivax*. Continuing experiments show that any

one species of anopheline mosquitoes is not significantly different in its susceptibility to *P. vivax* whether a domestic or foreign strain.

The Milledgeville (Georgia) laboratory is perfecting the technique of counting ookinetes 24 hours after the infective blood meal in order to obtain earlier reliable indications of infectivity in mosquitoes than can be secured by oocyst counting. This technique will be valuable in prognosticating the number of infected mosquitoes available for use in drug screening experiments. There are indications that variations in susceptibility of mosquito hosts occur mostly after the fertilization of the parasite.

The introduction of a Panamanian strain of *Anopheles albimanus* into the Columbia laboratory resulted in the discovery of its comparative inability to transmit certain domestic malaras. This strain of mosquitoes is apparently more susceptible to the McLendon strain of *P. falciparum* than to either Chesson or St. Elizabeth *P. vivax*.

It appears that under identical conditions the developmental cycle of malaria is longer in *A. albimanus* than in *A. quadrimaculatus*.

Immunity studies are being continued by giving Negroes massive dosages of Chesson *vivax* sporozoites or blood. Two Negroes were given *P. vivax*, Chesson strain, from an infected Negro. Although each received massive dosages, 108 and 236 millions of parasites by blood, neither developed an infection. This would seem to indicate that a *vivax* infection in one Negro has not necessarily been adapted so that it will successfully infect other Negroes.

These results continue to indicate the Negro has a natural resistance to foreign *vivax* malaria that is not easily overcome by massive sporozoite or trophozoite inoculations.

Data on the duration of *P. falciparum* in patients was collected at Milledgeville from the current study of histories of approximately 30 patients. It has been shown that infectivity to mosquitoes may occur for as long as 321 days after the primary attack. It is often assumed that low gametocyte counts predispose little or no infection in the mosquito. However, these experiments show that infection can occur when no gametocytes are demonstrated by the usual technique.



Several anti-malarials tested as agents to terminate infections show that paludrine does not appear to be as effective against *P. malariae* as chloroquine. Metachloridine seems to be a poor drug against *malariae* as compared to chloroquine and quinacrine.

Penicillin has been used as an adjunct to malaria therapy in approximately 43 neurosyphilitic patients. Doses varying from 20,000 to 100,000 units at either every 3 or 6 hours are used. The total regimen of 4-5 million units of penicillin has been instituted.

The cooperative drug testing experiments with the University of Chicago were continued. Ninety-one patients in Chicago were bitten by mosquitoes infected with Chesson *vivax* in Milledgeville. Twenty-five patients were either inoculated or re-inoculated with blood containing the same strain of parasites. Three others were re-inoculated with St. Elizabeth strain of *P. vivax*.

Various drug combinations were tested against the resulting 325 attacks of malaria. Nine drugs used prior to this report were given further study, and 10 new drugs have been or are being tested during this year in conjunction with quinine.

At Seagoville, Texas, 92 patients were inoculated with *vivax*, Chesson strain, in cooperation with the Chemotherapy Section of the Subdivision on Malaria.

In cooperation with the Naval Medical Research Institute, a project was begun to determine the possible effect of paludrine, quinine, sulfadiazine, SN-6911, and atabrine upon the development of *P. falciparum* in *A. quadrimaculatus*. The drugs are given to mosquitoes in their food after infective bites. Paludrine inhibited the malaria infection in the mosquito.

The comparison of a pure mosquito (sporozoite) line of inoculations with a pure blood line of transfers is still in progress. Eventual proof of whether continuous blood transfers inhibit gametocyte production is being sought. There is no indication to date that gametocyte formation is inhibited.

Hybridization experiments showed that it was possible to cross-breed *A. quadrimaculatus* and *A. maculipennis freeborni*, the two principal mosquito vectors of this country. However, the progeny of this cross were not strong and died before maturity.

In over 90 comparative feedings, native *A. quadrimaculatus* was found by far more susceptible to native *P. falciparum* than was the Panama strain of *A. albimanus*. However, the reverse was true, and *A. albimanus* was more susceptible than *quadrimaculatus* when the Panama strain of *falciparum* was employed.

## MISCELLANEOUS

### Mosquito Production

	Number Reared	Number Fed	Number Dissected	Per Cent Infected
<i>A. quadrimaculatus</i> .....	285,765	10,251	2,632	60
<i>A. m. freeborni</i> .....	63,591	883	265	73
<i>A. albimanus</i> .....	81,131	2,094	983	3
<i>A. punctipennis</i> .....	15,781			
<i>A. crucians crucians</i> .....	6,233			
<i>Aedes aegypti</i> .....	4,001			
<i>Culex pipiens</i> .....	3,409			
Other species .....	577			
		215*	46*	4*
<b>TOTAL</b> .....	460,488	13,443	3,926	46

\* Total all other species.

The laboratory continues to be a center for distributing inocula of established strains of malaria to be used in the treatment of neurosyphilis. During the year, 341 inocula were mailed in response to requests. Information was also supplied on the therapeutic use of malaria upon numerous occasions.

In accordance with requests from medical schools, research groups, and others, 1,538 malaria smears were sent. Mosquitoes, both infected and uninfected, have been supplied to scientific workers for experimental and teaching purposes.

During the year, 58 mosquito feedings and 112 blood inoculations were made to treat patients at the S. C. State Hospital.

The State Hospital at Milledgeville, Georgia, provided new quarters for the laboratory there; the personnel and equipment were moved into the new space which is almost triple that of quarters formerly occupied.

In December, 1947, Dr. Martin D. Young, Dr. Robert W. Burgess, and Mr. Don E. Eyles attended the meeting of the



National Malaria Society and American Society of Tropical Medicine in Atlanta. Dr. Young presented a paper, entitled "The Infectivity of Native Malarias in South Carolina to *Anopheles quadrimaculatus*," to the American Society of Parasitologists in Chicago, December 29, 1947. As the Presidential Address to the Association of Southeastern Biologists, Dr. Young read the paper, "An Evaluation of the Foreign Malarias Introduced into the United States by Returning Troops," April 16, 1948 in Gainesville, Florida.

Dr. Young was a delegate representing the National Malaria Society at the 4th International Congresses on Tropical Medicine and Malaria, Washington, D. C., where he presented an invited paper, entitled "The Adaptability of Exotic Malaria Parasites to Indigenous Anophelines," May 10-18, 1948.

At the annual meeting of the South Carolina Academy of Science, April, 1948, Dr. Young was elected Vice President for the forthcoming year.

The staff lectured to the following groups in Columbia: Le-Conte Scientific Society, Reserve Personnel of the 396th Evacuation Hospital, Malaria Control and Survey Detachment, and the senior students from the Medical College of South Carolina.

On May 23, 1948, Dr. Young was sent to Liberia by the United States Government to make a malaria survey of that country.

The staff members besides the Director are: Dr. Robert W. Burgess, entomologist; Dr. Gordon B. Wolcott, cytologist; Mr. William M. May, Mrs. Julia C. Stearns, Misses Margaret H. Fanning and Helen C. Russell, and Mr. W. D. Durham, laboratory technicians; Misses Elizabeth G. Williams and Jean A. Ruckle, stenographers; and John Sharper, laborer.

Visitors to the laboratory for periods of one day to one month were from the following places: U. S. Public Health Service, Bethesda, Maryland, Richmond, Virginia, and Atlanta, Georgia; Emory University, Atlanta, Georgia; Naval Medical Research Institute, Bethesda, Maryland; Veterans Administration, Atlanta, Georgia; Syracuse University Medical School, Syracuse, New York; Columbia University, New York, New York; Johns Hopkins University, Baltimore, Maryland; Teachers College, New Britain, Connecticut; Manila, Philippine Islands; San Juan, Rizal, Philippines; Diliman, Quezon City, Philippine Is-

lands; Georgetown, British Guiana; Damascus, Syria; Ankara, Turkey; Mexico City, Mexico; and Guatemala City, Guatemala.

The following papers were published by the staff during the year:

1947—

1. MacDougall, Mary Stuart  
 "Cytological Studies of Plasmodium: The Male Gamete,"  
*Jour. Nat. Mal. Soc.* 6(2) :91-98. June.
2. Coatney, G. Robert, Cooper, W. Clark, Young, Martin D.,  
 and McLendon, Sol B.  
 "Studies in Human Malaria: 1. The Protective Action of  
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Respectfully submitted

Martin D. Young  
Director

## DEPARTMENT OF MENTAL HYGIENE

### PERSONNEL

Coyt Ham, M.D.—State Mental Health Authority  
 W. P. Beckman, M.D.—Director  
 Mattie DeV. Ford—Personnel Secretary

#### Charleston Clinic

Olin B. Chamberlain, M.D.—Director  
 James Jennings Cleckley, M.D.—Psychiatrist  
 Margaret W. Guerard—Chief Psychiatric Social Worker  
 Elizabeth Bonnoitt—Psychiatric Social Worker  
 \*Frances M. Reves—Mental Hygiene Case Worker  
 Nathalie Gray—Psychometrist  
 \*Esther D. Gregorie—Electroencephalograph Technician  
 Harriet Stevens—Secretary-Receptionist

#### Spartanburg Clinic

\*John M. Pratt, M.D.—Psychiatrist  
 \*Mary F. Burts, Ph.D.—Psychologist  
 Kate S. Bumstead—Chief Psychiatric Social Worker  
 Vardell F. Harrell—Secretary-Receptionist

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\* Part-time



## DEPARTMENT OF MENTAL HYGIENE

Columbia, S. C., July 1, 1948

To the Board of Regents of the South Carolina State Hospital  
Columbia, S. C.

Gentlemen:

Submitted herewith is the annual report of the Department of Mental Hygiene, S. C. State Hospital, for the fiscal year ending June 30, 1948:

### DEVELOPMENT

The Board of Regents of the S. C. State Hospital, on December 17, 1946, established the Department of Mental Hygiene in compliance with the ruling of the Honorable John M. Daniel, Attorney General, dated August 8, 1946.

On July 1, 1947, when Federal funds became available on a grant-in-aid basis, the first clinic was initiated at Charleston, S. C., in conjunction with the Department of Neuropsychiatry of the Medical College of the State of South Carolina. During the year the work in this clinic increased so rapidly that it became necessary on three occasions to acquire larger quarters. The clinic is now housed in a large residence in close proximity to the Medical College, which quarters will be adequate to take care of the demands for some time. Plans are in the making to provide adequate space for the clinic in the new teaching hospital to be built in connection with the Medical College.

The Spartanburg Mental Hygiene Clinic was initiated on December 8, 1947. This clinic has done much good work but is handicapped in that the psychiatrist and psychologist work only part-time. The detailed statistical tables will show the amount of work performed by each clinic.

### TRAINING

The Department of Mental Hygiene, U. S. Public Health Service, under Public Law 487, the National Mental Health Act, allocated to South Carolina \$57,240. The appropriation of State funds is on the basis of one dollar for each two dollars of Federal funds.

The program provides for training, and early the Department gave assistance to qualified persons for training in the field of psychology and psychiatric social work. Training will be continued with emphasis as personnel becomes available. Only

through training will it be possible to develop the mental hygiene program to meet the needs.

### **EXTENT OF NEEDS**

A survey of the State reveals that to provide adequate mental health service on the basis of one full-time clinic for each 100,000 population will require eight clinics at centrally located points and two traveling clinics to cover remote areas. The demands made during the initial year on the two clinics established demonstrates the need for complete coverage and illustrates the importance of the mental hygiene program.

### **FUNCTIONS OF THE CLINICS**

The functions of the clinics are twofold, community service and teaching. The purpose is the prevention and treatment of emotional and mental diseases in adults and children, together with interpretation and dissemination of mental hygiene concepts on a community level. Patients go to the clinics voluntarily or are referred for diagnosis, for treatment, and for consultation. With reference to the children, the referrals as a rule result from symptomatic behavior with which the parents or others have been unable to cope, and it is in this group that the most benefit can be obtained. Early recognition of any disease, with proper treatment, is conducive to normal development. Underlying difficulties may have been expressed in training and disciplinary problems, such as food fads, disobedience, etc., or in lying and stealing, or in poor school achievement, truancy, or other educational problems. Children and adults alike seek clinic help in achieving a better adjustment with personality and emotional problems, such as, a tendency to withdraw, day dreaming, over-aggression, feelings of inferiority, and other symptoms of emotional maladjustment.

### **APPRECIATION**

Appreciation is expressed to the Board of Regents, the Governor, the General Assembly, the Medical Profession, the Nursing Profession, the South Carolina Mental Hygiene Society, and other social and civic organizations and individuals that have recognized the importance of the mental health program for their assistance in getting the program started.

Respectfully submitted

Coyt Ham, M.D.

State Mental Health Authority



## APPLICATIONS BY DISPOSITION

	Charleston Clinic	Spartanburg Clinic
Diagnosis only .....	88	62
Accepted for treatment .....	101	39
Adjunctive therapy .....	19	0
Psychometrics only .....	93	0
Social history only .....	24	0
Applications patient did not follow-up .....	48	2
TOTAL APPLICATIONS .....	378	111
TERMINATED DURING YEAR .....	282	92
CASES UNDER TREATMENT AS OF JUNE 30, 1948 .....	96	19

## DIAGNOSES OF CASES SEEN BY PSYCHIATRIST

Functional	Charleston Clinic	Spartanburg Clinic
Psychoneuroses .....	30	33
Inadequate personality .....	5	
Emotional immaturity .....	5	
Conduct disorder .....	41	
Enuresis .....	1	
Psychopathic personality .....	6	2
Schizophrenia .....	14	3
Schizoid personality .....	3	
Alcoholism .....	1	1
Situational reaction .....	11	
Simple depression .....	1	
Incipient schizophrenia .....	1	
Hypochondriasis .....	1	
Post partum anxiety state .....	1	
Primary behavior disorder .....	1	
Persistent infantilism .....	3	
Manic depressive .....		3
Involucional psychoses .....		5
Unclassified psychoses .....		4
Total Functional .....	125	51

**Organic**

Mental deficiency .....	23	5
Post operative hemiplegia .....	1	
Epilepsy .....	5	1
Epilepsy with mental deficiency .....	1	
Epilepsy, traumatic .....		1
Progressive encephalomalacia .....	2	
Cerebro-vascular disease .....	2	
Meningo encephalitis residual .....	2	
Chronic encephalitis .....	3	
Post-operative encephalopathy .....	1	
Cerebral birth trauma .....	4	
Paresis .....	1	
Lead encephalopathy .....	1	
Cretinism .....	1	
Birth injury .....		3
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Total Organic .....	47	10
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TOTALS .....	172	61

**SOURCES OF REFERRAL**

	Charleston Clinic	Spartanburg Clinic
Department of Public Welfare .....	55	15
Department of Health .....	19	2
Schools, Public and Private .....	64	8
Courts .....	28	16
Physicians .....	74	37
Parents, Relatives, Guardians .....	22	8
State Hospital .....	3	0
Family Welfare Agency .....	7	12
Other .....	106	13
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TOTAL .....	378	111